

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036226

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: BLOOMERS, LLC

**Current Principal Place of Business:**

843 CYPRESS PARKWAY  
SUITE 139  
KISSIMMEE, FL 34759

**New Principal Place of Business:**

**Current Mailing Address:**

843 CYPRESS PARKWAY  
SUITE 139  
KISSIMMEE, FL 34759

**New Mailing Address:**

FEI Number: 20-4672674

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMALL BUSINESS RESOURCES USA, INC.  
1601 PARK CENTER DR.  
SUITE 6A  
ORLANDO, FL 32835 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KEYES, REBEKAH J  
Address: 843 CYPRESS PARKWAY, SUITE 139  
City-St-Zip: KISSIMMEE, FL 34759

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: REBEKAH J KEYES

MGRM

04/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date