

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000025581

FILED
Apr 06, 2009
Secretary of State

Entity Name: PSE ENTERPRISES, LLC

Current Principal Place of Business:

23055 SW 53RD AVE
BOCA RATON, FL 33433

New Principal Place of Business:

9820 ORANGE PARK TRAIL
BOCA RATON, FL 33428

Current Mailing Address:

23055 SW 53RD AVE
BOCA RATON, FL 33433

New Mailing Address:

9820 ORANGE PARK TRAIL
BOCA RATON, FL 33428

FEI Number: 20-8669767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAST, SANDRA L
23055 SW 53RD AVE
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

GAST, SANDRA L
9820 ORANGE PARK TRAIL
BOCA RATON, FL 33428 US

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: SANDRA GAST

04/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GAST, NICHOLAS J
Address: 23055 SW 53RD AVE
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM () Delete
Name: GAST, SANDRA L
Address: 23055 SW 53RD AVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GAST, NICHOLAS J
Address: 9820 ORANGE PARK TRAIL
City-St-Zip: BOCA RATON, FL 33428

Title: MGRM (X) Change () Addition
Name: GAST, SANDRA L
Address: 9820 ORANGE PARK TRAIL
City-St-Zip: BOCA RATON, FL 33428

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: SANDRA GAST

MNGR

04/06/2009

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