

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000030467

FILED
Aug 13, 2008
Secretary of State

Entity Name: MISMATCH ENTEPRISES, LLC

Current Principal Place of Business:

740 SISTANA AVE
CORAL GABLES, FL 33146

New Principal Place of Business:

6600 NORTH ANDREWS AVENUE
SUITE 130
FT. LAUDERDALE, FL 33309

Current Mailing Address:

740 SISTANA AVE
CORAL GABLES, FL 33146

New Mailing Address:

6600 NORTH ANDREWS AVENUE
SUITE 130
FT. LAUDERDALE, FL 33309

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RAPPAPORT, EDWARD J
6600 N. ANDREWS AVE, STE 130
FT. LAUDERDALE, FL 33309 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: OLSEN, GREGORY W
Address: 704 SISTINA AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM (X) Change () Addition
Name: OLSEN, GREGORY W
Address: 6600 N. ANDREWS AVE., SUITE 130
City-St-Zip: FT. LAUDERDALE, FL 33309

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: GREGORY W. OLSEN

MGRM

08/13/2008

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