

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 31, 2009  
Secretary of State**

DOCUMENT# L07000090992

Entity Name: MOMUNE, LLC

**Current Principal Place of Business:**

3299 S. ANDREWS AVENUE  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

3299 S. ANDREWS AVENUE  
FT. LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 26-0845872      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PAUL SALVER, PA  
2721 EXECUTIVE PARK DRIVE  
SUITE 3  
WESTON, FL 33331 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: MGR      ( ) Delete  
Name: BAKATSELOS, DIMITRIOS  
Address: 3229 S. ANDREWS AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: MGR      ( ) Delete  
Name: MULLER, RONALD  
Address: 3229 S. ANDREWS AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33316

**ADDITIONS/CHANGES:**

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

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: DIMITRIOS BAKATSELOS      MGR      01/31/2009

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