

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000090992

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**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  
**Name:** BAKATSELOS, DIMITRIOS  
**Address:** 3229 S. ANDREWS AVENUE  
**City-St-Zip:** FT. LAUDERDALE, FL 33316

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

I hereby 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

02/23/2011

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