

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043196

FILED  
Jan 31, 2009  
Secretary of State

Entity Name: STROLLING IN STYLE, LLC

**Current Principal Place of Business:**

6850 NW 2ND AVENUE  
11  
BOCA RATON, FL 33487

**New Principal Place of Business:**

5721 NORTH FEDERAL HIGHWAY  
BOCA RATON, FL 33487

**Current Mailing Address:**

6850 NW 2ND AVENUE  
11  
BOCA RATON, FL 33487

**New Mailing Address:**

6850 NW 2ND AVENUE  
11  
BOCA RATON, FL 33487

FEI Number: 37-1565666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SABAG, JOSEPH  
6850 NW 2ND AVENUE  
11  
BOCA RATON, FL 33487 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: SABAG, REBECCA  
Address: 6850 NW 2ND AVENUE, #11  
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete  
Name: SABAG, JOSEPH  
Address: 6850 NW 2ND AVENUE, #11  
City-St-Zip: BOCA RATON, FL 33487

Title: MGRM ( ) Delete  
Name: SABAG, YITSHAK  
Address: 6115 SW 146 COURT  
City-St-Zip: MIAMI, FL 33183

Title: MGRM ( ) Delete  
Name: SABAG, LEE  
Address: 6115 SW 146 COURT  
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES:**

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

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

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: LEE SABAG

MGRM

01/31/2009

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