

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 24, 2009
Secretary of State**

DOCUMENT# L08000077377

Entity Name: LIVE GREEN CARE BLUE LLC.

Current Principal Place of Business:

16400 COLLINS AVE
646
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

16400 COLLINS AVE
646
SUNNY ISLES, FL 33160

New Mailing Address:

FEI Number: 30-0506462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAIME, STEVEN
16400 COLLINS AVE
646
SUNNY ISLES, FL 33160 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: MGRM () Delete
Name: JARAMILLO - HAIME, MARIA V
Address: 16400 COLLINS AVE # 646
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES:

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

Title: MGRM () Delete
Name: HAIME, STEVEN
Address: 16400 COLLINS AVE # 646
City-St-Zip: SUNNY ISLES, FL 33160

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: STEVEN HAIME

VP

03/24/2009

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