

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001403

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: F.A.B. MARKETING, LIMITED LIABILITY COMPANY

## Current Principal Place of Business:

3000 N.E. 30TH PLACE, STE. 308  
SUITE 311  
FT LAUDERDALE, FL 33306

## New Principal Place of Business:

4300 N . OCEAN BLVD.  
14-E  
FT LAUDERDALE, FL 33308 US

## Current Mailing Address:

3000 N.E. 30TH PLACE, STE. 308  
SUITE 311  
FT LAUDERDALE, FL 33306

## New Mailing Address:

4300 N OCEAN BLVD  
14-E  
FT. LAUDERDALE, FL 33308

FEI Number: 81-0592150

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROMLEY, FLORENCE  
3000 NE 30TH PL. #311  
FORT LAUDERDALE, FL 33306 US

## Name and Address of New Registered Agent:

JACOBS, CARLL ROSS  
4300 N OCEAN BLVD  
14-E  
FT.LAUDERDALE, FL US 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: CARLL ROSS JACOBS

04/26/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: BROMLEY, FLORENCE  
Address: 3000 NE 30TH PL., STE 311  
City-St-Zip: FORT LAUDERDALE, FL 33306

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JACOBS, CARLL R  
Address: 4300 N OCEAN BLVD #14-E  
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANAGING MEMBER CARLL R JACOBS

MM

04/26/2005

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