## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H43093

Entity Name: L.L.M. MANAGEMENT, INC

FILED Mar 03, 2008 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place of Business:		
40 ISLA BA FORT LAU	AHIA DR JDERDALE, F	EL 33316			
Current Mailing Address:			New Mailing Address:		
40 ISLA BA FORT LAU	AHIA DR JDERDALE, F	FL 33316			
FEI Number	: 59-2627985	FEI Number Applied For ( )	FEI Number Not Appl	licable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and	Address of	New Registered Agent:
	ÁHIA DR ERDALE, FL :				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,
SIGNATUI	RE:				
		nic Signature of Registered Ag	ent		Date
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	MOHNANI, LÀ 40 ISLA BAHI		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MOHNANI, NE 1009 SE 9TH		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition
Title: Name: Address: City-St-Zip:	Mohnani, là 2424 laguna	•	Title: Name: Address: City-St-Zip:	MOHNANI, KA 2424 LAGUNA	•
Title: Name:	D ( MOHNANI, LA	) Delete JU L.	Title: Name:	(	) Change ( ) Addition

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: LAKHI L. MOHNANI PD 03/03/2008

1238 ELEGANTE CT.

FORT LAUDERDALE, FL 33316

Address:

City-St-Zip: