

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081489

Entity Name: A.B. & COMPANY, LLC

FILED  
Apr 26, 2008  
Secretary of State

**Current Principal Place of Business:**

3501 W. VINE ST. SUITE 334  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**Current Mailing Address:**

3501 W. VINE ST. SUITE 334  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

FEI Number: 20-3397253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAQUERO, ARNOLD  
3501 W. VINE ST SUITE 334  
KISSIMMEE, FL 34741 US

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

BAQUERO, ARNOLD  
3311 WHITESTONE CIR APT 108  
KISSIMMEE, FL 34741 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: ARNOLD BAQUERO

04/26/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BAQUERO, ARNOLD  
Address: 3501 W. VINE ST SUITE 334  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BAQUERO, ARNOLD  
Address: 3311 WHITESTONE CIR APT 108  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: MGRM ( ) Change (X) Addition  
Name: RODRIGUEZ, DELIA  
Address: 3311 WHITESTONE CIR APT 108  
City-St-Zip: KISSIMMEE, FL 34741 US

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: ARNOLD BAQUERO

MGR

04/26/2008

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