2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000005888

1. Entity Name
PRIVATE LABEL BROKERS INTERNATIONAL, L.L.C.



FILED
Mar 09, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

5943 MASTERS BLVD. ORLANDO, FL 32819 5943 MASTERS BLVD. ORLANDO, FL 32819



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

02202007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 49-1501533

statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

PETERSON, RONALD A 5943 MASTERS BLVD. ORLANDO, FL 32819

The above named entity subporting obligations of registers.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Olifor La		
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PETERSON, RONALD A 5943 MASTERS BLVD. ORLANDO, FL 32819		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000660684 03/20/07-80010-014 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee employered to execute this report as required by Chapter 608, Florida Statutes			