

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011200

Entity Name: THE BOOKKEEPING DEPT, LLC

FILED  
Jul 05, 2007  
Secretary of State

## Current Principal Place of Business:

5401 S KIRKMAN ROAD  
SUITE 310  
ORLANDO, FL 32819

## Current Mailing Address:

P.O BOX 771894  
ORLANDO, FL 32877

## New Principal Place of Business:

21 S. CLYDE AVE  
SUITE 8  
KISSIMMEE, FL 34741

## New Mailing Address:

21 S. CLYDE AVE  
SUITE 8  
KISSIMMEE, FL 34741

FEI Number: 73-1645219      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

PENN, MAIRA A  
1768 NESTLEWOOD TRAIL  
ORLANDO, FL 32837      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: PENN, MAIRA A  
Address: 1768 NESTLEWOOD TRAIL  
City-St-Zip: ORLANDO, FL 32837

Title: MGRM ( ) Delete  
Name: PENA, LUIS FELIPE  
Address: 1768 NESTLEWOOD TRAIL  
City-St-Zip: ORLANDO, FL 32837

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PENN, MAIRA A  
Address: 21 S. CLYDE AVE STE 8  
City-St-Zip: KISSIMMEE, FL 34741

Title: MGRM (X) Change ( ) Addition  
Name: PENA, LUIS FELIPE  
Address: 21 S. CLYDE AVE STE 8  
City-St-Zip: KISSIMMEE, FL 34741

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: MAIRA A. PENN

MGRM

07/05/2007

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