2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L01000018768

1. Entity Name
POLAR BEAR, LLC

Principal Place of Business	Mailing Address
4740 S OCEAN BLVD #1206 HIGHLAND BCH, FL 33487	4740 S OCEAN BLVD #1206 HIGHLAND BCH, FL 33487

DO NOT WRITE IN THIS SPACE

01212008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
22-3838387	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HAIMES, ALBERT
4740 S OCEAN BLVD #1206
HIGHLAND BCH, FL 33487

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HAIMES, ALBERT
STREET ADDRESS	4740 SO. OCEAN BLVD. #1206
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487

TITLE	MGRM
NAME	HAIMES, HOWARD
STREET ADDRESS	222 W 15 STREET
CITY-ST-ZIP	NEW YORK, NY 10011

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000799769
01/30/08-80081-019 138.75

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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 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: _____ 1/24/2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #