

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT.**

FILED
May 16, 2007 8:00 am
Secretary of State

05-16-2007 90172 016 ****50.00

DOCUMENT # L02000020172

1. Entity Name

FROZEN FAVORITES, LLC



Principal Place of Business

5160 NORTHRIDGE RD
SARASOTA, FL 34238

Mailing Address

5160 NORTHRIDGE RD
SARASOTA, FL 34238



04262007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUSSO, STEVEN
5160 NORTHRIDGE ROAD, APT. 206
SARASOTA, FL 34238

**DO NOT WRITE
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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RUSSO, STEVEN
STREET ADDRESS	5160 NORTHRIDGE RD APT 206
CITY-STATE-ZIP	SARASOTA, FL 34238

TITLE	
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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STEVEN RUSSO
MANAGING MEMBER

4/30/07

Date

941-350-8061

Daytime Phone #