2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # LO2000026977 1. Entity Name JIM BOB'S TRADING CO.,LLC						SECRETARY OF STATE DIVISION OF CORPORATIONS 03 JUN 27 AM 9: 37					
Principal Plac	ce of Business	Mailing Address						2	.		
•	& Partners. P.L. D Ste. 101	C/O WEBSTER & PARTNERS. P.L. 1936 LEE ROAD STE. 101 WINTER PARK FL 32789					I 3 07 8 9 07 8 9 08 1 9 9 08 1 9 9 08 1	40 80 44 01 4 140			
c/o Ŷei	Place of Business rgey and Yergey, P.A.	3. Mailing Address c/o Yergey and Yergey, P.A.			.A.						
	Magnolia Avenue	Suite, Apt. #, etc. 211 N. Magnolia Avenue				CHECK HERE IF MAKING CHANGES					
Orlando	e, Florida	City & State Orlando, Florida				FEI Numb -23848				pplied For ot Applicable	+
Zip	Country	Zip	Coun	try					\$5.00 Ad		1
32801	- Marcale	32801				_	e of Status Desired	<u> </u>	Fee Require		
	6.= Name and Address of Current F	legistered Agent		Nico		Vame and	d Address of New R	egistered /	Agent		4
W&F	P SERVICËS,INC.			Name	Yerg	ey ar	nd Yergey,	P.A.			
	S:LEE-ROAD:STE:=101=					ox Numb	er is Not Acceptable				1
	TER PARK FL 32789					<u>lagno.</u>	lia Avenue				1
O The shave	named entity submits this statement for	the Committee of the co		City Or1	ando		the in the Court of Fig.	FL	Zip Coc 328		
the obligat	tions of registered agent	and purpose to changing its	registere	sa office of t	registered age	ent, or be	an, in the state of Fit		2 9 -0:	·	
SIGNATURE	Signature, typica or purpos flaring of registated agent ar	nd title if applicable. (NOTE	: Registere	Agent signatur	e required when re	einstating)	 	DATE			١
		FILE NO	W!!! I	EE IS \$5	50.00						1
		Make Check Payabl	e to Flo	orida Dep	artment of	State					١
	,	Due	By Ma	ıy 1, 2003							
9.	MANAGING MEMBER	S/MANAGERS /	10.				ADDITIONS,	CHANGES	-		1.
TITLE	MGR	Delete	TITLE	I		ers of			☐ Change	Addition	
NAME STREET ADDRESS	Webster, David-A 1936 Lee-Road Ste. 101	•	NAM!	ET ADDRESS			000178		4		
CITY-ST-ZIP	WINTER PARK FL 32789-7201	,		-ST-ZIP		05/01	./03 <u>-0</u> 1055-	_000	പാ കുത കുത	•	
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STREET ADDRESS				ET ADDRESS	1936 LE	EE RD	, STE 101				
CITY-ST-ZIP	The second secon			ST-ZIP		PARK	, FL -32789	-7201		——————————————————————————————————————	-
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44 1											
indicated	certify that the information supplied with to on this report is true and accurate and the bility company or the receiver or trustee	his filing does not qualify for hat my signature shall have t	the exer	nption state	ed in Section 1 t as if made up	119.07(3) Inder oath	(i), Florida Statutes. In that I am a manag	further cer ing membe	tify that the i	nformation er of the	