#### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### DOCUMENT # L02000032306

1. Entity Name

B THEN C THEN G, L.L.C.



Principal Place of Business

PO BOX 1825 2121 NW 30 Rd BOCA RATON, FL 33429 3343/ Mailing Address

2121 NW 30 RD BOCA RATON, FL 33431

### FILED Apr 14, 2008 8:00 am Secretary of State

04-14-2008 90221 026 \*\*\*143.75

00044340



03202008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 06-1669835

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHNORR, BONNIE KAY 11 NORTH J STREET LAKE WORTH, FL 33460

## DO NOT WRITE IN THIS SPACE

8. The at	oove named entity submits this statement for the purpose of challigations of registered agent.	anging its register	ed office or registered agent, or both, in the S	tate of Florida. I am familiar with, and accept
SIGNATL	JRE			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)		DATE
After i	ILE NOW!!! FEE IS \$138.75 May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM		1	
NAME	SCHNORR, BONNIE KAY			

#### STREET ADDRESS P.O. BOX 1825 2121 NW304 Pl. CITY-ST-ZIP BOCA RATON, FL 33429-TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS ₽ITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

# DO NOT WRITE 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 province or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: / Manan

3/20/08 371-7220