

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000007631

Entity Name: PETAL PUSHERS LLC

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1200 CLINT MOORE RD., STE 4  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

1200 CLINT MOORE RD., STE 4  
BOCA RATON, FL 33487 US

**New Mailing Address:**

FEI Number: 65-1090638

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YUDELL, JANE  
17152 MANDY LYNN COURT  
BOCA RATON, FL 33496 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  
Name: YUDELL, JANE  
Address: 17152 MANDY LYNN COURT  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM  
Name: ECKHARDT, JOHN  
Address: 710 SOUTH WEST 51 AVENUE  
City-St-Zip: MARGATE, FL 33068

I hereby 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: JANE YUDELL

MGMR

01/19/2010

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