

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008990

FILED
May 21, 2007
Secretary of State

Entity Name: AFRICAN VIBES LLC

Current Principal Place of Business:

6808 SW 40TH CT.
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6808 SW 40TH CT.
MIRAMAR, FL 33023

New Mailing Address:

FEI Number: 13-4242210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HOPE, NERISSA
6803 S W 40 COURT
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

HOPE, NERISSA
6808 S W 40 COURT
MIRAMAR, FL 33023 US

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: _____

05/21/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT.
City-St-Zip: MIRAMAR, FL 33023

Title: PRES () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT
City-St-Zip: MIRAMAR, FL 33023

Title: VP () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT
City-St-Zip: MIRAMAR, FL 33023

Title: TRES () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT
City-St-Zip: MIRAMAR, FL 33023

Title: SEC () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT
City-St-Zip: MIRAMAR, FL 33023

Title: MAN () Delete
Name: HOPE, NERISSA
Address: 6808 SW 40TH CT
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: NERISSA HOPE

CEO

05/21/2007

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