

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020397

FILED
Jul 09, 2005
Secretary of State

Entity Name: MOMMY'S LIL' HELPER, LLC

Current Principal Place of Business:

18002 RICHMOND PLACE DRIVE
STE. 2427
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

18002 RICHMOND PLACE DRIVE
STE. 2427
TAMPA, FL 33647 US

New Mailing Address:

PO BOX 47585
TAMPA, FL 33647 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

LEVINE, JON
18002 RICHMOND PLACE DRIVE
STE. 2427
TAMPA, FL 33647 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JONATHAN, LEVINE
Address: 18002 RICHMOND PLACE DRIVE, 2427
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEVINE, JON
Address: P.O. BOX 47585
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JON LEVINE

MGRM

07/09/2005

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