

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024156

Entity Name: BABS ENTERPRISES, L.L.C.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

4362 SPRINGMOOR DRIVE EAST
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

12297 HIDDEN HILLS DRIVE
JACKSONVILLE, FL 32225 US

Current Mailing Address:

4362 SPRINGMOOR DRIVE EAST
JACKSONVILLE, FL 32225 US

New Mailing Address:

12297 HIDDEN HILLS DRIVE
JACKSONVILLE, FL 32225

FEI Number: 13-4258312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARCE, JAMES T
4362 SPRINGMOOR DR., E.
JACKSONVILLE, FL 32225 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: MGR () Delete
Name: PEARCE, JAMES T
Address: 4362 SPRINGMOOR DR., E.
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: PEARCE, JAMES T
Address: 4362 SPRINGMOOR DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32225

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: JAMES T. PEARCE

MR.

01/07/2008

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