


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000030461 1. Entity Name KURLISS, LLC |  |
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| Principal Place of Business 3777 COVENTRY LANE BOCA RATON, FL 33496 | Mailing Address 3777 COVENTRY LANE BOCA RATON, FL 33496 |
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03122008No Chg-LLC

CR2E083 (12/07)

| | |
|---|---|
| 4. FEI Number 75-3133961 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

DO NOT WRITE IN THIS SPACE

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| 6. Name and Address of Current Registered Agent KURSTIN, GARY 7917 GLEN NEVIS TERR BOCA RATON, FL 33496 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM LISSAUER, JOANNE 3777 COVENTRY LANE BOCA RATON, FL 33496 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM KURSTIN, BETTE 7917 GLEN NEVIS TERRACE BOCA RATON, FL 33496 |
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04/02/09-80049-017 138.75

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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Bette Kurstin 3/13/08 (561)483-9909
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #