## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED A MILE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## DOCUMENT # L03000036449

1. Entity Name ACE KITCHEN DIRECT, LLC



Principal Place of Business

2150 NW 33 STREET POMPANO BEACH, FL 33069 US Mailing Address

2150 NW 33 STREET POMPANO BEACH, FL 33069

US

## Apr 244,64908 08:00 AM Secretary of State

BHOWARD COUNTY PROPERTY APPRAISER



01032008 No Chg-LLC

CR2E083 (12/07)

Fee Required

4. FEt Number			Applied For
83-0374677	_		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional	

6. Name and Address of Current Registered Agent

LIN, SONG 2150 NW 33 STREET POMPANO BEACH, FL 33069

the obligations of registered agent.

SIGNATURE: X

## DO NOT WRITE IN THIS SPACE

4/14/08

Daytime Phone #

SIGNATURE					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE; Registered Agent signature required when reinstating)	DATE		
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	MGR LIN, SONG 2150 NW 33 STREET POMPANO BEACH, FL 33069		U00000918211 05/13/08-80074-002 138.75		
TITLE NAME STREET ADDRESS CITY+ST+ZIP					
TITLE NAME STREET AODRESS CITY-ST-ZIP		DO N	NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
maicatea	ertify that the information supplied with this filing does not on this report is true and accurate and that my signature should company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver or trustee empowered to execute the company or the receiver of the company	iall have the same legal offect as it made under outh	that I am a managing member or manager of the		

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. Lam familiar with, and accept