## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000037262

1. Entity Name
MANUEL BREND, LLC



FILED May 01, 2008 08:00 AN Secretary of State

Principal Place of Business

11435 S.W. 140TH AVENUE DUNNELLON, FL 34432 Mailing Address

P.O. BOX 1784 DUNNELLON, FL 34430



04302008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		 Applied For
20-0290975	- [	Not Applicable
5. Certificate of Status Desired	\$5.0	Additional

6. Name and Address of Current Registered Agent

LUMAPAS, VIVIENE F 11435 S.W. 140TH AVENUE DUNNELLON, FL 34432

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	THIS	•	

<ol><li>The above named entity submits this statement for the purpose of the obligations of registered agent.</li></ol>	changing its registered office or registered agent, or both, in the State of Florida. I	am tamiliar with, and accept
SIGNATURE	INDIE Ronsterer Apart signature varuited upon constituto	Tr.

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

000000941885 05/28/08-80122-022 138.79

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRP
NAME	LUMPAS, VIVIENE
STREET ADDRESS	11435 SW 140TH AVENUE
City-St-ZIP	DUNNELLON, FL 34432
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	• • • • • • • • • • • • • • • • • • • •
STREET ADDRESS	
CITY-ST-ZIP	

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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:

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

1/20/08

752-4657730

Daytime Pho