2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000037715

1. Entity Name

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GB INTERIORS & DECORATING, LLC



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

11780 U.S. HWY. 1, STE. 500 NORTH PALM BEACH, FL 33408 Mailing Address

11780 U.S. HWY. 1, STE. 500 NORTH PALM BEACH, FL 33408



04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	 Applied For
56-24015 <u>38</u>	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HAILE, SHAW & PFAFFENBERGER, P.A. 660 U. S. HIGHWAY ONE 3RD FLOOR NORTH PALM BEACH, FL. 33408

DO NOT WRITE IN THIS SPACE

NORTH PA	ALM BEACH, FL 33408	IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of cha- tions of registered agent.	agging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	-
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating) DATE	
FILE After Ma ₃	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		7
TITLE	MGR		
NAME	NICKLAUS, BARBARA B		
STREET ADDRESS	11780 U.S. HWY ONE SUITE 500	Hococococc	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408		
TITLE	MGR	00/ £U/ 05=00055=7005 130. 13	
NAME	O'LEARY, NANCY N		
STREET ADDRESS	11780 U. S. HWY ONE SUITE 500		
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408		
TITLE			
NAME			
STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	i
TITLE NAME		IN THIS SPACE	
STREET ADDRESS			ĺ
CITY-ST-ZIP			
TITLE NAME			
STREET ADDRESS			
CITY - ST - ZIP			

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.

NATURE: LAMAGE DE DEINTED MANE OF SIGNING MANAGING MEMBER

IGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

(UD)

Dustine Stone #