#### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000038318

1. Entity Name

L B & B ENTERPRISES, LLC



Principal Place of Business

Mailing Address

4616 S. WOODLYN DRIVE TAMPA, FL 33611

4616 S. WOODLYN DRIVE TAMPA, FL 33611

### FILED Feb 07, 2007 08:00 AM Secretary of State



01112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1609962 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KTG&S REGISTERED AGENT CORPORATION 10 S.E. 2ND STREET, 28TH FLOOR MIAMI, FL 33131

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	The above named entity submits this statement for the purpose of chathe obligations of registered agent.	anging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIC	GNATURE	(NOTE: Registered Agent signature required when roinstating)	DAJE
_	Eiling Eoo in \$50.00		

#### Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURGSTINER, J. DAVID 4616 S. WOODLYN DRIVE TAMPA, FL 33611	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filling does not qualify for the ex	

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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 SIGNATUR MEMBER, OR AUTHORIZED REPRESENTATIVE

2/4/07 813-766-9788

Davisma Phone #