

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039015

Entity Name: BREAKOUT, L.L.C.

FILED  
Jan 16, 2008  
Secretary of State

**Current Principal Place of Business:**

6175 NW 167 ST.  
SUITE, G-14  
MIAMI LAKES, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6175 NW 167 ST.  
SUITE, G-14  
MIAMI LAKES, FL 33015

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCKENZIE, EMANUEL J  
6175 NW 167 ST.  
SUITE, G-14  
MIAMI, FL 33015 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MCKENZIE, KATHY L  
Address: 6175 NW 167TH ST. SUITE, G-14  
City-St-Zip: MIAMI LAKES, FL 33015

Title: MGR ( ) Delete  
Name: MCKENZIE, EMANUEL J  
Address: 4756 N.W. 167TH ST.  
City-St-Zip: MIAMI, FL 33014

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: KATHY MCKENZIE

MGR

01/16/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date