

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045491

Entity Name: MIRABAZAAR LLC

FILED  
Apr 17, 2007  
Secretary of State

**Current Principal Place of Business:**

949 EMERSON DR NE  
PALM BAY, FL 32907

**New Principal Place of Business:**

5820 N 17TH ST  
TAMPA, FL 33610

**Current Mailing Address:**

949 EMERSON DR NE  
PALM BAY, FL 32907

**New Mailing Address:**

5820 N 17TH ST  
TAMPA, FL 33610

FEI Number: 41-2116137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LASH, MIRA  
949 EMERSON DR NE  
PALM BAY, FL 32907 US

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

LASH, MIRA  
5820 N 17TH ST  
TAMPA, FL 33610 US

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: MIRA LOUISE LASH

04/17/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LASH, MIRA L CEO  
Address: 949 EMERSON DR NE  
City-St-Zip: PALM BAY, FL 32907

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LASH, MIRA L CEO  
Address: 5820 N 17TH ST  
City-St-Zip: TAMPA, FL 33610

I hereby certify that the information supplied with this filing does not qualify for the 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: MIRA LASH

MS

04/17/2007

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