2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Oct 09, 2007
Secretary of State

DOCUMENT# L03000047195

Entity Name: SCOOP LOUNGE LLC

Current Principal Place of Business:

4142 NORTH 28TH TERRACE
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

4142 NORTH 28TH TERRACE
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 86-1158175 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAWARDI, RALPH
4142 NORTH 28TH TERRACE
HOLLYWOOD, FL 33020 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: MAWARDI, RALPH
Address: 4142 NORTH 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MAWARDI, ROMI
Address: 4142 NORTH 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGR ( ) Change (X) Addition
Name: MAWARDI, KEITH
Address: 4142 NORTH 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: MGR ( ) Change (X) Addition
Name: MAWARDI, RALPH
Address: 4142 NORTH 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

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: MAWARDI RALPH MGR 10/09/2007

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