

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000050092

1. Entity Name
MAXIME PIERRE ENTERPRISES, LLC.



Principal Place of Business
855 EUCLID AVENUE
SUITE 102
MIAMI BEACH, FL 33139

Mailing Address
855 EUCLID AVENUE
SUITE 102
MIAMI BEACH, FL 33139

FILED
Sep 15, 2008 08:00 AM
Secretary of State



07312008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
61-1460632

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIERRE, MAXIME
855 EUCLID AVENUE
SUITE 102
MIAMI BEACH, FL 33139

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

MAXIME PIERRE

(NOTE: Registered Agent signature required when reinstating)

DATE

9/9/08

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U00000959756
09/15/08-800005-011 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
PIERRE, MAX
855 EUCLID AVENUE, SUITE 102
MIAMI BEACH, FL 33139

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

[Signature]