2007 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L03000053402 1. Entity Name KIDD'S ISLAND BAKERY LLC Principal Place of Business Mailing Address **6305 MIRAMAR PKWY** 6305 MIRAMAR PKWY MIRAMAR, FL 33023 MIRAMAR, FL 33023 DO NOT WRITE IN THIS SPACE

FILED
May 03, 2007 08:00 A
Secretary of State



04152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
38-3694323		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHN, LY 1257 NW PEMBROI		DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the purpose of changing its register ions of registered agent.	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.		d Agent signature required when reinstating) DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOHN, LYSTRA 1257 NW 144 TERR. PEMBROKE PINES, FL 33028	U00000760125 05/24/07-80070-001 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMAS, SHELDON 1257 NW 144 TERR. PEMBROKE PINES, FL 33028	301 2 11 31 303 73 301 303 30
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
Indicated	certify that the information supplied with this filling does not qualify for the exon this report is true and accurate and that my signature shall have the salubility company or the eceiver or trustee empowered to execute this report.	emptions contained in Chapter 119, Florida Statutes. I further certify that the information me legal effect as if made under oath; that I am a managing member or manager of the as required by Chapter 608, Florida Statutes.

SIGNATURE: