2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000020372

1. Entity Name SBB EQUITY, LLC



Principal Place of Business

Mailing Address

2300 GLADES ROAD, STE. 100E BOCA RATON, FL 33431 2300 GLADES ROAD, STE. 100E BOCA RATON, FL 33431

FILED Apr 08, 2008 08:00 A Secretary of State



01292008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-0875794

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENFIELD, WILLIAM R 2300 GLADES ROAD, STE. 100E BOCA RATON, FL 33431

DO NOT WRITE 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		
	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENFIELD, WILLIAM R 2300 GLADES RD, STE 100E BOCA RATON, FL 33431	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		00000986185 04/18/08-80045-007 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		de the continue of in Chapter 110 Floride Capture 1 further continues the intermedian
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		

11. I nereby certify that the information supplied with this liting coes not qualify for the exemptions contained in Unapter 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 it 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: William R. SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

William R. Greenfield

3/26/2008

561-392-6662

Daytime Phone #