# 2008 LIMITED LIABILITY COMPANY ANNUAL REPERT

#### DOCUMENT # L04000022240 1. Entity Name

AMANDA MELISSA LLC



**FILED** Feb 14, 2008 08:00 AM Secretary of State

Principal Place of Business

950 JEFFERSON STREET HOLLYWOOD, FL 33019 Mailing Address

950 JEFFERSON STREET HOLLYWOOD, FL 33019



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01092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1911045 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTER, STEVEN D 950 JEFFERSON ST HOLLYWOOD, FL 33019

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The above named entity submits this statement for the purpose of characteristics of registered agent.	anging its registered office or registered agent, or both, in th	e State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75		

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CASTER, STEVEN D 950 JEFFERSON ST HOLLYWOOD, FL 33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SAIONTZ, STEVEN 9515 SW 60 CT MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

870858000000 02/22/08-80016-003 138.75

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

SIGNATURE:

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE