

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062993

**FILED
Apr 12, 2009
Secretary of State**

Entity Name: PAT SAKER LLC

Current Principal Place of Business:

16505 NW 16TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

16505 NW 16TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

P.O. BOX 161
BELMAR, NJ 07719

FEI Number: 76-0825496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SAKER, PATRICIA J
16505 NW 16TH STREET
PEMBROKE PINES, FL 33028 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: MGRM () Delete
Name: SAKER, PATRICIA J
Address: 16505 NW 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM (X) Delete
Name: SAKER, KRISTIN
Address: 16505 NW 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATRICIA J SAKER

PRES

04/12/2009

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