

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90461 050 ****50.00

DOCUMENT # L04000068012

1. Entity Name
CREATIVE COOKIES, LLC



Principal Place of Business
**9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156**

Mailing Address
**9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156**

40037451



2. Principal Place of Business - No P.O. Box #

**9350 S Dixie Hwy
Penthouse V**

3. Mailing Address

**9350 S Dixie Hwy
Penthouse V**

02112007 Chg-LLC CR2E083 (12/06)

Suite, Apt., etc.
Penthouse V

Suite, Apt., etc.

Penthouse V

City & State
MIAMI, FL

City & State

MIAMI, FL

Zip
33156

Country

USA

Zip

33156

Country

USA

4. FEI Number
20-1561095

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**TOLLEY, SHAWN
9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BUIRAGO, MICHAEL
9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BUIRAGO, JUAN C
9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
TOLLEY, SHAWN
9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RODRIGUEZ, CARLOS
9200 S. DADELAND BLVD., SUITE #412
MIAMI, FL 33156** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**9350 S Dixie Hwy
Penthouse V
MIAMI, FL 33156** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**9350 S Dixie Hwy
Penthouse V
MIAMI, FL 33156** ☐ Change ☐ Addition

TITLE
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**9350 S Dixie Hwy
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MIAMI, FL 33156** ☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #