

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086156

Entity Name: THE AHHH SPA LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

5200 NORTH FEDERAL HIGHWAY
SUITE 5
FORT LAUDERDALE, FL 33308 US

Current Mailing Address:

3689 NW 17TH TERRACE
OAKLAND PARK, FL 33309 US

New Principal Place of Business:

5200 N FEDERAL HWY
5
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

2120 NE 52ND ST
FORT LAUDERDALE, FL 33308 US

FEI Number: 20-2266034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAIR, CAROLINE
3689 NW 17TH TERRACE
OAKLAND, FL 33309 US

Name and Address of New Registered Agent:

JODI, TIMMONS
2120 NE 52ND ST
FORT LAUDERDALE, FL 33308 US

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: JODI TIMMONS

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BLAIR, CAROLINE
Address: 3689 NW 17TH TERRACE
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM () Delete
Name: TIMMONS, JODI
Address: 2631 NE 14TH AVE R204
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: TIMMONS, JODI
Address: 2120 NE 52ND ST
City-St-Zip: FORT LAUDERDALE, FL 33308

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: JODI TIMMONS

MGRM

04/28/2009

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