

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089393

FILED  
Jun 15, 2008  
Secretary of State

Entity Name: 93 DEGREES, LLC

**Current Principal Place of Business:**

16821 NW 20 AVENUE  
MIAMI GARDENS, FL 33056

**New Principal Place of Business:**

**Current Mailing Address:**

16821 NW 20 AVENUE  
MIAMI GARDENS, FL 33056

**New Mailing Address:**

FEI Number: 04-3807016      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SPARKS, DARLENE  
16821 NW 20 AVENUE  
MIAMI GARDENS, FL 33056      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: SPARKS, DARLENE  
Address: 16821 NW 20 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: MGRM ( ) Delete  
Name: SCONIERS, JACQUELLE E  
Address: 3961 NW 187 STREET  
City-St-Zip: MIAMI GARDENS, FL 33055

Title: MGRM ( ) Delete  
Name: PALMER, DENAYA  
Address: 2083 SW 87TH TERR  
City-St-Zip: MIRAMAR, FL 33025

**ADDITIONS/CHANGES:**

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

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: DARLENE T. SPARKS

MGM

06/15/2008

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