


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**


**FILED**  
**Jan 22, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L05000007669  
 1. Entity Name  
 ME & ME TOO, LLC



Principal Place of Business      Mailing Address  
 2813 CAPISTRANO WAY      2813 CAPISTRANO WAY  
 NAPLES, FL 34105      NAPLES, FL 34105

**DO NOT WRITE IN THIS SPACE**



01142008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number 20-2283962	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDIN, RALPH S  
 2813 CAPISTRANO WAY  
 NAPLES, FL 34105

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDIN, RALPH S 2813 CAPISTRANO WAY NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MICHETTI, MICHAEL L 2813 CAPISTRANO WAY NAPLES, FL 34105
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 01/23/08-80073-013 138.75

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

SIGNATURE: Ralph S Goldin      Date: 1/18/08      Daytime Phone #: 239-403-8482

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #