

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011649

FILED
Jan 08, 2008
Secretary of State

Entity Name: BROWARD BUG BLASTERS, LLC

Current Principal Place of Business:

9121 JOHNSON STREET
HOLLYWOOD, FL 33024

New Principal Place of Business:

9121 JOHNSON STREET
PEMBROKE PINES, FL 33024

Current Mailing Address:

9121 JOHNSON STREET
HOLLYWOOD, FL 33024

New Mailing Address:

9121 JOHNSON STREET
PEMBROKE PINES, FL 33024

FEI Number: 20-2281097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMOS, TOMAS
9121 JOHNSON STREET
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

RAMOS, TOMAS
9121 JOHNSON STREET
PEMBROKE PINES, FL 33024 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:

01/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RAMOS, TOMAS
Address: 9121 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: MGRM () Delete
Name: HERRERA, BAYARDO
Address: 9121 JOHNSON STREET
City-St-Zip: HOLLYWOOD, FL 33024 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAMOS, TOMAS
Address: 9121 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: MGRM (X) Change () Addition
Name: HERRERA, BAYARDO
Address: 9121 JOHNSON STREET
City-St-Zip: PEMBROKE PINES, FL 33024 US

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: TOMAS RAMOS

MGRM

01/08/2008

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