


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000030233</b>	
1. Entity Name ROYAL PAWS, LLC	

Principal Place of Business 8235 W SUNRISE BLVD PLANTATION, FL 33322	Mailing Address 8235 W SUNRISE BLVD PLANTATION, FL 33322
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DO NOT WRITE IN THIS SPACE



01262008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-1245889	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  REICES, SONIA 853 SW 120TH WAY DAVIE, FL 33325
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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 _____
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**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	MGR REICES-NICASIO, LISA 786 SW 120TH WAY DAVIE, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REICES, SONIA 512 NW 102 WAY PLANTATION, FL 33324
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U00000807125  
02/06/08-80069-021 138.75

DO NOT WRITE IN THIS SPACE

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:** 