2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000042505

1. Entity Name
NEW HORIZON KENNEL LLC

Principal Place of Business	Mailing Address
1251 N. DIXIE HWY. BAY #12 POMPANO BEACH, FL 33061	P.O. BOX 1629 POMPANO BEACH, FL 33061

DO NOT WRITE IN THIS SPACE

01252007No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-4536280	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DRAYTON, MELVIN
4195 NW 67TH WAY
CORAL SPRINGS, FL 33067

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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
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

U00000610421
02/02/07-80018-023 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	DRAYTON, MELVIN
STREET ADDRESS	1251 N. DIXIE HWY., BAY #12
CITY-ST-ZIP	POMPANO BEACH, FL 33061
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 1/25/07 (954)785-4215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #