

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051848

Entity Name: BISCUITI BLUE PR, LLC

FILED
Feb 10, 2008
Secretary of State

Current Principal Place of Business:

10634 VERSAILLES BLVD.
WELLINGTON, FL 33467

New Principal Place of Business:

3138 NORTH OASIS DR.
BOYNTON BEACH, FL 33426

Current Mailing Address:

10634 VERSAILLES BLVD
WELLINGTON, FL 33467

New Mailing Address:

3138 NORTH OASIS DR.
BOYNTON BEACH, FL 33426

FEI Number: 33-1151820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOM, JONATHAN ESQ.
2295 NW CORPORATE BLVD., SUITE 117
BOCA RATON, FL 33431 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: CHARLES ANDREWS,
Address: 10634 VERSAILLES BLVD
City-St-Zip: WELLINGTON, FL 33467

Title: MGRM (X) Delete
Name: BISCUITI, NICOLE A
Address: 10634 VERSAILLES BLVD.
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BISCUITI, NICOLE A
Address: 3138 NORTH OASIS DR.
City-St-Zip: BOYNTON BEACH, FL 33426

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: NICOLE BISCUITI

MGR

02/10/2008

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