

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070252

Entity Name: UP & UP BLINDS LLC

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

2405 NW 137TH AVE.  
SUNRISE, FL 33323

## New Principal Place of Business:

6003 NW 70 AVE  
TAMARAC, FL 33321

## Current Mailing Address:

2405 NW 137TH AVE.  
SUNRISE, FL 33323

## New Mailing Address:

6003 NW 70 AVE  
TAMARAC, FL 33321

FEI Number: 20-3158016

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENESES, JUAN  
2405 NW 137TH AVE  
SUNRISE FL, FL 33323 US

## Name and Address of New Registered Agent:

MENESES, JUAN  
6003 NW 70 AVE  
TAMARAC, FL 33321 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: JUAN MENESES

01/14/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MENESES, JUAN  
Address: 2405 NW 137TH AVE.  
City-St-Zip: SUNRISE, FL 33323

Title: MGR ( ) Delete  
Name: MENESES, LINDSAY  
Address: 2405 NW 137TH AVE.  
City-St-Zip: SUNRISE, FL 33323

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MENESES, JUAN  
Address: 6003 NW 70 AVE  
City-St-Zip: TAMARAC, FL 33321

Title: MGR (X) Change ( ) Addition  
Name: MENESES, LINDSAY  
Address: 6003 NW 70 AVE  
City-St-Zip: TAMARAC, FL 33321

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: LINDSAY MENESES

MGR

01/14/2009

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