

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076117

Entity Name: MOLAVE ENTERPRISE LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

2054 WELLS AVE.
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

2054 WELLS AVE.
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-3816233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAN, ISABELLE
2345 BEE RIDGE RD. STE. 5
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

GAN, ISABELLE
2054 WELLS AVE.
SARASOTA, FL 34232 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: ISABELLE GAN

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GAN, BETA B
Address: 2345 BEE RIDGE RD. STE. 5
City-St-Zip: SARASOTA, FL 34232

Title: MGRM () Delete
Name: GAN, ISABELLE B
Address: 2345 BEE RIDGE RD. STE. 5
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GAN, BETA B
Address: 2054 WELLS AVE.
City-St-Zip: SARASOTA, FL 34232

Title: MGRM (X) Change () Addition
Name: GAN, ISABELLE B
Address: 2054 WELLS AVE.
City-St-Zip: SARASOTA, FL 34232

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: ISABELLE GAN

MGRM

04/26/2007

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