

# **2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000083121

**FILED**  
**Jun 24, 2008**  
**Secretary of State**

**Entity Name:** BATIM LLC

**Current Principal Place of Business:**

1012 BEL AIR DRIVE  
HIGHLAND BEACH, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

1012 BEL AIR DRIVE  
HIGHLAND BEACH, FL 33487

**New Mailing Address:**

**FEI Number:** 04-3825025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

BATIM LLC1  
1012 BEL AIR DR  
HIGHLAND BEACH, FL 33487 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:** MORRIS HAKIM

06/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HAKIM, MORRIS  
Address: 1012 BEL AIR DRIVE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: MGR ( ) Delete  
Name: HAKIM, ANAT  
Address: 1012 BEL AIR DRIVE  
City-St-Zip: HIGHLAND BEACH, FL 33487

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** MORRIS HAKIM

MGR

06/24/2008

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