

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092934

FILED
Jan 08, 2009
Secretary of State

Entity Name: BS LLC

Current Principal Place of Business:

4404 W BURKE ST
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

4404 W BURKE ST
TAMPA, FL 33614 US

New Mailing Address:

FEI Number: 11-3760020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTAMARIA, BARBARO
4404 W BURKE ST
TAMPA, FL 33614 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: MGR () Delete
Name: SANTAMARIA, BARBARO
Address: 4404 W BURKE ST
City-St-Zip: TAMPA, FL 33614 US

Title: MGR () Delete
Name: CANALES, ARMANDO
Address: 305 OAK ROSE LN
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: CABAN, JULIO A
Address: 14208 JOANN ST
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: VALLE, YOSBANY
Address: 4404 W BURKE ST
City-St-Zip: TAMPA, FL 33614

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: SANTAMARIA, BARBARO

MGR

01/08/2009

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