2008 LIMITED LIABILITY COMPANY

Apr 07, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # L05000117643 BESSIE'S SAMPLE ROAD, L.L.C. Mailing Address Principal Place of Business 9497 N.W. 3RD STREET 9497 N.W. 3RD STREET CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071 CR2E083 (12/07) 03102008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number Not Applicable 26-8368043 \$5,00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DO NOT WRITE LAMBIDIS, BESSIE 9497 N.W. 3RD STREET CORAL SPRINGS, FL 33071 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 000000885912 04/13/08~50633 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE LAMBIDIS, BESSIE NAME 9497 N.W. 3RD STREET STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED