


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000119665</b>	
1. Entity Name <b>BRIDALS BY AGNES, LLC</b>	
	
Principal Place of Business <b>217 ST JOE PLAZA DR PALM COAST, FL 32164 US</b>	Mailing Address <b>217 ST JOE PLAZA DR PALM COAST, FL 32164 US</b>



03202008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-3949552</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**

**DOBSA, AGNES M  
27 WESTCHESTER LN  
PALM COAST, FL 32164**

**DO NOT WRITE  
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 **AGNES M. DOBSA**

Signature, typed or printed name of registered agent and title if applicable

*Agnes M. Dobsa*

(NOTE: Registered Agent signature required when reinstating)

**03-27-08**

DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**000000875619  
04/11/08-80039-019 143.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DOBSA, AGNES 27 WESTCHESTER LN PALM COAST, FL 32164</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DOBSA, WILLIAM L 27 WESTCHESTER LN PALM COAST, FL 32164</b>
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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.

**SIGNATURE: AGNES M. DOBSA**

*Agnes M. Dobsa*

**03-27-08**

**386-447-8686**

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

Date

Daytime Phone #