

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000018206

FILED  
Aug 10, 2007  
Secretary of State

Entity Name: ON THE BRINK LLC

## Current Principal Place of Business:

3522 FLORIDA BLVD  
PALM BEACH GARDENS, FL 33410 US

## New Principal Place of Business:

3543 EVERGLADES RD  
PALM BEACH GARDENS, FL 33410 US

## Current Mailing Address:

3522 FLORIDA BLVD  
PALM BEACH GARDENS, FL 33410 US

## New Mailing Address:

3543 EVERGLADES RD  
PALM BEACH GARDENS, FL 33410 US

FEI Number: 14-1950655      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

BRINK, SHANNON  
3522 FLORIDA BLVD  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

BRINK, SHANNON  
3543 EVERGLADES RD  
PALM BEACH GARDENS, FL 33410 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:

08/10/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BRINK, SHANNON  
Address: 3522 FLORIDA BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BRINK, SHANNON  
Address: 3543 EVERGLADES RD  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: SHANNON BRINK

MGRM

08/10/2007

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