

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035682

Entity Name: MVP MOMENTS, LLC

FILED
Mar 05, 2009
Secretary of State

Current Principal Place of Business:

2509 MONTCLAIRE CIRCLE
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

2509 MONTCLAIRE CIRCLE
WESTON, FL 33327

New Mailing Address:

FEI Number: 20-4830253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELFMAN, STEVEN M
2509 MONTCLAIRE CIRCLE
WESTON, FL 33327 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: MGRM () Delete
Name: HELFMAN, STEVEN M
Address: 2509 MONTCLAIRE CIRCLE
City-St-Zip: WESTON, FL 33327

Title: MGRM () Delete
Name: HELFMAN, JONI R
Address: 2509 MONT CLAIRE CIR
City-St-Zip: WESTON, FL 33327

Title: MGRM () Delete
Name: KAUFMAN, DANIEL
Address: 284 CAMERON DR
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: KAUFMAN, JENNIFER
Address: 284 CAMERON DR
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

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

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

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: STEVEN M. HELFMAN

MGRM

03/05/2009

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