

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000048060

FILED
May 08, 2008
Secretary of State**Entity Name:** YMS LLC**Current Principal Place of Business:**4063 N. GOLDENROD ROAD
106
WINTER PARK, FL 32792**New Principal Place of Business:****Current Mailing Address:**4063 N. GOLDENROD ROAD
106
WINTER PARK, FL 32792**New Mailing Address:****FEI Number:** 56-2582800**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALVAREZ, DELIA
4063 N. GOLDENROD ROAD
106
WINTER PARK, FL 32792 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: HASAN, MOHAMMED
Address: 1009 KELSEY AVENUE
City-St-Zip: OVIEDO, FL 32765**Title:** MGRM () Delete
Name: HASAN, YOUSEF
Address: 1009 KELSEY AVENUE
City-St-Zip: OVIEDO, FL 32765**Title:** MGRM () Delete
Name: ALMAWALI, KHOLOUD
Address: 518 BRIARWOOD COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM (X) Change () Addition
Name: HABASH, CAROLINA
Address: 5483 VINELAND ROAD APT 10109
City-St-Zip: ORLANDO, FL 32811 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: MOHAMMED HASAN

MGRM

05/08/2008

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