2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# L06000055657

Entity Name: SPIRITED SISTERS, LLC

Current Principal Place of Business:

10735 NW 7TH AVENUE,
SUITE 2
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

10735 NW 7TH AVENUE,
SUITE 2
MIAMI, FL 33168

New Mailing Address:

FEI Number: 14-1966300 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACKSON, FLORA
10735 NW 7TH AVENUE,
SUITE 2
MIAMI, FL 33168 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:	P	( ) Delete
Name:	JACKSON, FLORA	
Address:	10735 NW 7TH AVENUE, SUITE 2	
City-St-Zip:	MIAMI, FL 33168	
Title:	VP	( ) Delete
Name:	GLASS ALDRICH, GALE	
Address:	13035 NW 65TH STREET	
City-St-Zip:	MIAMI, FL 33147	
Title:	S	( ) Delete
Name:	POWELL, ERICA R	
Address:	1020 NW 39TH STREET	
City-St-Zip:	MIAMI, FL 33127	
Title:	S	( ) Delete
Name:	LOCKWOOD, BELETA	
Address:	15 NE 193 RD STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33179	
Title:	T	( ) Delete
Name:	HARRIS, JOSEPHINE B	
Address:	1120 NW 173RD AVENUE,	
City-St-Zip:	PEMBROKE PINES, FL 33029	
Title:	FS	( ) Delete
Name:	GILLARD, RUDEAN	
Address:	2531 NW 121 STREET	
City-St-Zip:	MIAMI, FL 33167	

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:	
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: FLORA JACKSON-HOLMES PRA 04/10/2008

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