

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066319

FILED
Jul 22, 2007
Secretary of State

Entity Name: PLETHORA SMOKESHOP AND MEMORABILIA, LLC

Current Principal Place of Business:

4500 GALWAY DR
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

4500 GALWAY DR
SARASOTA, FL 34232 US

New Mailing Address:

PO BOX 15397
SARASOTA, FL 34277 US

FEI Number: 20-5140083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BOYER, JOHN JR
4500 GALWAY DR
SARASOTA, FL 34232 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: BOYER, JOHN JR
Address: 4500 GALWAY DR
City-St-Zip: SARASOTA, FL 34232 US

Title: MGRM () Delete
Name: BOYER, DEBORAH
Address: 4500 GALWAY DR
City-St-Zip: SARASOTA, FL 34232 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOYER, JOHN JR
Address: PO BOX 15397
City-St-Zip: SARASOTA, FL 34277 US

Title: MGRM (X) Change () Addition
Name: BOYER, DEBORAH
Address: PO BOX 15397
City-St-Zip: SARASOTA, FL 34277 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: JOHN BOYER JR

MGR

07/22/2007

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