

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074588

Entity Name: NAMEN'S ENTERPRISE, LLC

FILED  
Jun 17, 2009  
Secretary of State

## Current Principal Place of Business:

7095 NW 179 ST  
112  
MIAMI, FL 33015 US

## New Principal Place of Business:

3355 NW 180 STREET  
MIAMI, FL 33056 US

## Current Mailing Address:

7095 NW 179 ST  
112  
MIAMI, FL 33015 US

## New Mailing Address:

3355 NW 180 STREET  
MIAMI, FL 33056 US

FEI Number: 20-5279420      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:

NAMEN, SAMIR  
7095 NW 179 ST  
112  
MIAMI, FL 33015 US

## Name and Address of New Registered Agent:

NAMEN, SAMIR  
3355 NW 180 STREET  
MIAMI, FL 33056 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: SAMIR NAMEN

06/17/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: NAMEN, SAMIR  
Address: 7095 NW 179 ST STE 112  
City-St-Zip: MIAMI, FL 33015 US

Title: MGR ( ) Delete  
Name: NAMEN, WALID  
Address: 7095 NW 179 ST STE 112  
City-St-Zip: MIAMI, FL 33015 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: NAMEN, SAMIR  
Address: 3355 NW 180 STREET  
City-St-Zip: MIAMI, FL 33056 US

Title: MGR (X) Change ( ) Addition  
Name: NAMEN, WALID  
Address: 3355 NW 180 STREET  
City-St-Zip: MIAMI, FL 33056 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: SAMIR NAMEN

MGRM

06/17/2009

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