

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081304

FILED
Apr 12, 2007
Secretary of State

Entity Name: ACHSAH'S DELIGHT BAKERY, LLC

Current Principal Place of Business:

3075 NW 19TH STREET
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

3075 NW 19TH STREET
FORT LAUDERDALE, FL 33311

New Mailing Address:

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

Name and Address of Current Registered Agent:

JONES, WAYNE
3075 NW 19TH STREET
FORT LAUDERDALE, FL 33311 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: JONES, WYNE
Address: 3075 NW 19TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: JONES, HYACINTH
Address: 3075 NW 19TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: BROWN, MILLICENT
Address: BEVERLY DISTRICT, ST. ANN'S BAY
City-St-Zip: ST. ANN, JAMAICA, W.I.,

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: HYANCINTH A. JONES MBR 04/12/2007

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