2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 09, 2008 08:00 AN
Secretary of State

ANNUAL REPORT			17166	Secretary of St
DOCUMENT # L060000975 1. Entity Name CHECK SYSTEMS LLC	37) 	secretary of Su
Principal Place of Business 10358 COPPER LAKE DRIVE BOYNTON BEACH, FL 33437	Mailing Address 10358 COPPER LAKE DRIVE BOYNTON BEACH, FL 33437		} (CENUM	; EUNE (OU) (EUL! EUNE IN) (EULE) #1 (OU)
			04102008No Chg-LLC	CR2E083 (12/07)
DO NOT WRITE	IN THIS SPA	CE	4. FEI Number 01-0876079 5. Certificate of Status Desired	Applied For Not Applicable \$5.00 Additional Fee Regulred
6. Name and Address of Current Re	gistered Agent		The Control of the Co	3 M 3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STITSKY, MARSHALL 10358 COPPER LAKE DRIVE BOYNTON BEACH, FL 33437	٨٠۪		DO NOT W IN THIS SP	ACE
8. The above named entity submits this statement for the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and printed name of registered agent.		ed office or registe. Id Agent signature required	j when rens(aling)	DATE 138.75
After May 1, 2008 Fee will be \$538.75				
9. MANAGING MEMBER IIILE PRES NAME STITSKY, MARSHALL PRES. 10358 COPPER LAKE DRIVE BOYNTON BEACH, FL 33437 IIILE NAME STREET ADDRESS CITY-ST-ZIP	S/MANAGERS			
IIILE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT W IN THIS SE	/RITE PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I heraby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

TITLE NAME STREET ADDRESS

R PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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