

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000107876

FILED
Feb 08, 2009
Secretary of State

Entity Name: DISCOUNT BOUNCERS, LLC

Current Principal Place of Business:

200 S.W. 117 TERRACE, NO. 102
PEMBROKE PINES, FL 33025

New Principal Place of Business:

263 SW 122 TERRACE
PEMBROKE PINES, FL 33025

Current Mailing Address:

200 S.W. 117 TERRACE, NO. 102
PEMBROKE PINES, FL 33025

New Mailing Address:

263 SW 122 TERRACE
PEMBROKE PINES, FL 33025

FEI Number: 20-8322044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ULETT, KATHIE-ANN CPA
3220 S.W. 194TH TERRACE
MIRAMAR, FL 33029 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: MGR () Delete
Name: BELNAVIS, CARLA
Address: 200 S.W. 117 TERRACE, NO. 102
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGRM () Delete
Name: FLYNN-COWAN, TYPHONNIE
Address: 200 SW 117 TERRACE, NO. 102
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BELNAVIS, CARLA
Address: 263 SW 122 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: MGRM (X) Change () Addition
Name: FLYNN-COWAN, TYPHONNIE
Address: 263 SW 122 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

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: TF

MGRM

02/08/2009

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