


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 27, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000108430 1. Entity Name FUSIONFOODS, LLC	
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Principal Place of Business 6 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483	Mailing Address 6 SOUTH OCEAN BOULEVARD DELRAY BEACH, FL 33483
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DO NOT WRITE IN THIS SPACE



08232008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5849965	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

LEWIS, ROBERT F ESQ.
401 E. LAS OLAS BOULEVARD
SUITE 1850
FORT LAUDERDALE, FL 33301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

08/27/08-80006-003 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, SCOTT W 308 IVANHOE COURT LANGHORNE, PA 19047
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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: Patricia Gerstadt **8.20.08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

561-638-6936