2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED Jun 01, 2007 8:00 am Secretary of State

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DOCUI 1. Entity Nam						9-2007	•						
A ASTONISHING TROPHY & AWARDS LLC													
Principal Place	of Business	Mailing Address	Mailing Address			3000222							
3825 N. POWERLINE RD. FORT LAUDERDALE FL 33309			3825 N. POWERLINE RD. FORT LAUDERDALE FL 33309			00-							
FORT LAUD	DERDALE FL 33309	FORT LADDERDALE F	-L 3330	9									
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address					iddirdir om gone et			(87 1014 8641 21	105; W 12-		
Suite, Apt. #, etc.		Suite, Apt. #, otc.					st MOORE	CF	R2E083 (· · ·			
City & State		City & Stato				4. FEI Num	1bor <u> </u>	1796		No	plied For a Applicable		
Ζiρ 	Country	Zip Cour		ury .			ic of Status D		<u>Г</u>	5.00 Add			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name									
382	FAND, MARK 5 N. POWERLINE RD.					Street Address (P.O. Box Number is Not Acceptable)							
FOR	RT LAUDERDALE FL 3330	9						-					
				City		· · · · · · · · · · · · · · · · · · ·			FL	Zip Code	0		
	named entity submits this statement ions of registered agent.	for the purpose of changing its	registere	ed office or	register	ed agont, or t	ooth, in the St	ata ol Florid	la. I am fa	miliar with,	and accept		
SIGNATURE .	Signature, typed or printful infrire of registered age	rrs and sittle 4 applicable. (NOT	E Regulere	d Aquni signalii	e ledinieg	when (entlating)			DATE				
FILE NOW!!! FEE IS \$50.0													
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9.	MANAGING MEM	BERS/MANAGERS	10.				ADD	NTIONS/CH	HANGES				
ME	MGRM	Delete	11116						ĺ	Change	■ Addition		
NAME SIRLET ADORESS	ROBERTS, MICHAEL 3825 N. POWERLINE RD.		NAM STRE	L'TADORESS	DET	ETE I	MIKE RU	RETETS					
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	_	CITY	-SI-ZIP									
IIILE	MGRM	☐ Deleie	10141						ĺ	Change	Addition		
NAME .	GELFAND, MARK		NAM	E. Etadoress							ŀ		
STREEL FADORESS CHY-ST-ZIP	3825 N. POWERLINE RD. FORT LAUDERDALE FL 33309			-S1-ZP									
IIIL	TOTAL ENGOLUSIA	☐ Delcie	Tilte	:			-			Change	Addition		
HAME] -		NAM										
SINEET ADDRESS CITY- ST-ZIP				FTADORESS ST-ZIP									
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NAME STREET ADDRESS			NAM STRU	E. I ADDRESS									
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BHT		☐ Deleic	tilli NAM						(Change	Addition		
NAME STRIET ADDRESS				E I ADDRESS									
CITY - ST - ZIP	·		CITY	·SI-ZIP									
HOE		☐ Octete	100	1					. [Change	Addition		
NAME STREET ADDRESS			MAN SIRI	T ADDRESS									
CITY - ST - ZIP				-Si-ZIP									
11. I hereby indicated	certify that the information supplied fon this report is true and accurate ability company or the receiver or true	and that my signature shall hav	e the sai	me legal eli	oct as it	made under	oath; that I a	talutes. I fui am a manaç	rther certifi ging memb	y that the in per or mana	nformation ager of the		
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SIGNATURE: Mark Stuffling Tills 4/30/07 954-566-3755 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE DAM DRYLING PLONE 4													