2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L06000111903

A & B PRODUCTS, LLC

FILED Apr 16, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

168 BELLEZZA TERRACE ROYAL PALM BEACH, FL 33411

11420 US HWY ONE STE 147 NORTH PALM BEACH, FL 33408

US



DO NOT WRITE IN THIS SPACE

04122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5908691 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

ALLAIN, ROGER **168 BELLEZZA TERRACE** ROYAL PALM BEACH, FL 33411

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 registating)

DATE

FILE NOW!!! FEE IS \$138,75 After May 1, 2008 Fee will be \$538.75

U00000901359 04/29/08-80065-021 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALLAIN, ROGER 168 BELLEZZA TERRACE ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARBIC, LINDA R 168 BELLEZZA TERRACE ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR ED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE