

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114836

Entity Name: MS FIESTAS & GIFTS, LLC

FILED
Jul 19, 2007
Secretary of State

Current Principal Place of Business:

200 SW 1ST STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

200 SW 1ST STREET
BELLE GLADE, FL 33430

New Mailing Address:

PO BOX 340
BELLE GLADE, FL 33430

FEI Number: 20-5984291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DE LEON, MARBELIS
109 SE 6TH STREET N
BELLE GLADE, FL 33430 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: DE LEON, MARBELIS
Address: 109 SE 6TH STREET N
City-St-Zip: BELLE GLADE, FL 33430

Title: MGR () Delete
Name: BAEZ, SOBEIDA
Address: 605 NE 2ND STREET
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SOBEIDA BAEZ

MRS

07/19/2007

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