

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000035910

FILED
Apr 16, 2009
Secretary of State

Entity Name: HIS & HER'S FAMILIES, LLC

Current Principal Place of Business:

23269 STATE ROAD 7
M112
BOCA RATON, FL 33428 US

New Principal Place of Business:

Current Mailing Address:

23269 STATE ROAD 7
M112
BOCA RATON, FL 33428 US

New Mailing Address:

FEI Number: 20-8780097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINKEL, SAMANTHA
23269 STATE ROAD 7
M112
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

VICTOR LERRO & COMPANY, CPA, PA
50 SW 2ND AVENUE SUITE 201
BOCA RATON, FL 33432 US

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: V LERRO

04/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: DIR () Delete
Name: NAPPI, ROBERT
Address: 23269 STATE ROAD 7, M112
City-St-Zip: BOCA RATON, FL 33428 US

Title: DIR () Delete
Name: SCALZITTI, SHERIE E
Address: 23269 STATE ROAD 7, M112
City-St-Zip: BOCA RATON, FL 33428 US

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: R NAPPI

DIR

04/16/2009

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