2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051577

Current Principal Place of Business:

Entity Name: D-SIS'S CATERING SERVICES, L.L.C.

FILED Apr 03, 2008 Secretary of State

2500 N.W. 55TH BOULEVARD GAINESVILLE, FL 32653				
Current Mailing Address:		New Mailing Address:		
2500 N.W. 55TH BOULEV GAINESVILLE, FL 32653	ARD			
FEI Number: 26-0287799	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
PERRY, BEVERLY 2500 N.W. 55TH BOULEV GAINESVILLE, FL 32653	ARD 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:				
Electronic Signature of Registered Agent		nt	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		

New Principal Place of Business:

Title: MGRM Title: (X) Change () Addition () Delete PERRY, BEVERLY PERRY, BEVERLY Name: Name: Address: 2500 N.W. 55TH BOULEVARD Address: 2500 N.W. 55TH BOULEVARD City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653 Title: MGRM Title: () Delete () Change () Addition Name: LEE, MELVE Name: Address: 9330 SUNNY OAK DRIVE Address: City-St-Zip: RIVERVIEW, FL 35696 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FOSTER, JANET Name: Name: Address: PO BOX 87 Address: City-St-Zip: LACROSSE, FL 35658 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DUDLEY, SHARON Name: 234 N.W. 7TH AVENUE Address: Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: MGRM Title: Title: () Delete () Change () Addition DANIELS, REATHA Name: Name: 6606 N.W. 27TH AVENUE Address: Address: GAINESVILLE, FL 32609 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition DANIELS, ANNETTE Name: Name: Address: 1511 N.E. 16TH AVENUE Address: City-St-Zip: GAINESVILLE, FL 32601 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: BEVERLY PERRY MGM 04/03/2008