

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054715

FILED
Sep 03, 2008
Secretary of State

Entity Name: BAIL BONDS BY DINA EDWARDS, LLC

Current Principal Place of Business:

607 COOKMAN AVENUE
ORLANDO, FL 3285

New Principal Place of Business:

1512 W. GORE ST. SUITE B
ORLANDO, FL 32805

Current Mailing Address:

607 COOKMAN AVENUE
ORLANDO, FL 3285

New Mailing Address:

1512 W. GORE ST. SUITE B
ORLANDO, FL 32805

FEI Number: 22-3964640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

EDWARDS, QUIDINA N MANAGER
1512 W. GORE ST. SUITE B
ORLANDO, FL 32805 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: QUIDINA EDWARDS

09/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: EDWARDS, QUIDINA
Address: 607 COOKMAN AVENUE
City-St-Zip: ORLANDO, FL 3285

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EDWARDS, QUIDINA
Address: 1512 W. ORE ST. SUITE B
City-St-Zip: ORLANDO, FL 32805

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: QUIDINA EDWARDS

MGR

09/03/2008

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