

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060902

Entity Name: SQUARE FEET, LLC

FILED
Jan 31, 2008
Secretary of State

Current Principal Place of Business:

620 SILVER BIRCH PLACE
LONGWOOD, FL 32750

New Principal Place of Business:

3836 ORLANDO DR
SANFORD, FL 32773

Current Mailing Address:

620 SILVER BIRCH PLACE
LONGWOOD, FL 32750

New Mailing Address:

3836 ORLANDO DR
SANFORD, FL 32773

FEI Number: 26-0336957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BHAVSAR, KASHMIRA
1053 MAITLAND CENTER COMMONS
SUITE 101
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

SILLERICO, ERWIN S VP
437 WOLDUNN CIR
LAKE MARY, FL 32746 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: ERWIN SAUL SILLERICO

01/31/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: INDUSTRIAS Y COMERCI, O REAL SUPERME R CADO LT
Address: AV. OQUENDO NO. 630
City-St-Zip: TORRES SOFER, COCHABAMBA, ,, BOLIVIA

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: VP () Change (X) Addition
Name: SILLERICO, ERWIN S VP
Address: 437 WOLDUNN CIR
City-St-Zip: LAKE MARY, FL 32746 US

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: ERWIN SAUL SILLERICO

VP

01/31/2008

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