

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Jun 23, 2008 8:00 am
Secretary of State

05-08-2008 90104 044 ***138.75

DOCUMENT # L07000067221

1. Entity Name
ADRIANA'S PARTY RENTAL, LLC



Principal Place of Business
**900 CUMBERLAND TERRACE
DAVIE FL 33325
US**

Mailing Address
**900 CUMBERLAND TERRACE
DAVIE FL 33325
US**

30009728

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

1st MOORE CR2E083 (10/07)

4. FEI Number
260435552

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**CALLE, RUBEN D
201 RACQUET CLUB RD
5508
WESTON FL 33326**

7. Name and Address of New Registered Agent
Name **ANA CERVO**
Street Address (P.O. Box Number is Not Acceptable)
701 SW 148 AV Apt 111
City **DAVIE, FL** Zip Code **33325**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Luiz A. Lajares* DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LAJARES, LUZ A 900 CUMBERLAND TERRACE DAVIE FL 33325	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Luiz A. Lajares* 3/7/08 954-888-1801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ATTACHMENT

30009728
LO 7000067221



Federal Tax ID / EIN

This is your provisional Employer Identification Number:

26-0435552

Today's Date is: June 27, 2007 GMT

You will receive a confirmation letter in U.S. mail within fifteen days.
The letter will also contain useful tax information for your business or organization.

If you have input any of the information on your application in error, please wait seven days and contact the EIN Toll Free area at 1-800-829-4933, Monday - Friday, 7:30am - 5:30pm. If you do not want to call, please make corrections on the letter you receive confirming your EIN and return it to the IRS.

If you are going to complete other on-line applications that require your Employer Identification Number(EIN) you can copy it by performing the following steps:

- 1) Use your mouse to highlight your EIN (blue number on top of page) by moving your pointer on top of the number.
- 2) Press the Ctrl key at the same time pressing the C key.

Once you copy your EIN you can paste it in the appropriate place by pressing the Ctrl key at the same time pressing the V key.

You may click on the buttons below for different print options or to fill out another Form SS-4.

[Review and Print Form SS-4](#)

[Fill Out Another Form SS-4](#)

[Click here to return to the Internet Employer Identification Number landing \(start\) page.](#)

ATTACHMENT

300097228
L07000067221

DOCUMENTS OF ORGANIZATION

OF

ADRIANA'S PARTY RENTAL, LLC.

FLORIDA LIMITED LIABILITY COMPANY

DOCUMENT NUMBER OF LLC

L07000067221

FEDERAL TAX ID

EMPLOYER IDENTIFICATION NUMBER

26-0435552

2006

PRO BUSINESS SOLUTIONS, CORP.

MARTHA RIVERA

954-658-4234 RIVMAT@AOL.COM