

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000075674

Entity Name: USANE SERVICES LLC

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

11380 PROPERITY FARMS ROAD 221E  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

11380 PROPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

11380 PROPERITY FARMS ROAD 221E  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

11380 PROPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC  
11380 PROPERITY FARMS ROAD 221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

CORPORATE CREATIONS NETWORK INC  
11380 PROPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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:

04/25/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WAYMAR SERVICES LIM, TED  
Address: 11380 PROPERITY FARMS ROAD 221E  
City-St-Zip: BRITISH VIRGIN ISLANDS,

**ADDITIONS/CHANGES:**

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: M A MUNOZ OBO WAYMAR SERVICES LIMITED

MGR

04/25/2008

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