

FILED
Apr 04, 2008 8:00 am
Secretary of State

03-11-2008 90128 041 ***138.75

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L07000079864																																																															
1. Entity Name EMY&ME ENTERPRISES, LLC																																																															
Principal Place of Business 8191 PIMLICO PLACE WESLEY CHAPEL, FL 33544		Mailing Address C/O TEMPLE H. DRUMMOND, ESQ. 328 WEST BEARSS AVENUE TAMPA, FL 33613																																																													
2. Principal Place of Business - No P.O. Box #		3. Mailing Address c/o Temple H. Drummond, Esq. Suite, Apt. #, etc. 6987 East Fowler Avenue City & State Tampa, Florida Zip 33617 Country USA																																																													
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		4. FEI Number 26-0672414 Applied For ☐ Not Applicable ☒																																																													
6. Name and Address of Current Registered Agent DRUMMOND, TEMPLE H ESQ. WINICK WEHLE DRUMMOND & ROSS, LLP 328 WEST BEARSS AVENUE TAMPA, FL 33613		7. Name and Address of New Registered Agent Temple H. Drummond, Esq. Street Address (P.O. Box Number is Not Acceptable) Drummond Wehle & Ross LLP 6987 East Fowler Avenue City Tampa FL Zip Code 33617																																																													
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 <u>Temple H. Drummond, Esq.</u> <u>Temple H. Drummond, Esq.</u> <u>2/24/2008</u>																																																															
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																																																													
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <u>Denise B. Gelb</u> <u>Denise B. Gelb</u> <u>3-3-08</u> <u>813-416-1750</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date/Phone #																																																															