

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091237

Entity Name: CAVIAR DREAMS, LLC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

404E HAWK ST.
ROCKLEDGE, FL 32955

New Principal Place of Business:

1743 HUNTINGTON LANE
UNIT 113
ROCKLEDGE, FL 32955

Current Mailing Address:

PO BOX 562774
ROCKLEDGE, FL 32956

New Mailing Address:

FEI Number: 01-0904008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THISTLE, LAURA D
941 WHETSTONE PL
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

CLONEY, CHRIS
661 BREVARD AVE.
COCOA, FL 32922 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: CHRIS CLONEY

03/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THISTLE, LAURA D
Address: 941 WHETSTONE PLACE
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM () Delete
Name: THISTLE, JAMES R SR.
Address: 941 WHETSTONE PL
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THISTLE, LAURA D
Address: 615 N. COCOA BLVD.
City-St-Zip: COCOA, FL 32922

Title: MGRM (X) Change () Addition
Name: THISTLE, JAMES R SR.
Address: 615 N. COCOA BLVD.
City-St-Zip: COCOA, FL 32922

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: LAURA D. THISTLE

MGRM

03/24/2009

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