

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105785

FILED
Jul 09, 2008
Secretary of State

Entity Name: GYNAMIE ENTERPRISE LLC

Current Principal Place of Business:

13350 NW 27TH AVENUE
OPA-LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

13350 NW 27TH AVENUE
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 26-1293569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

OPARE, JOHN
13350 NW 27TH AVENUE
OPA-LOCKA, FL 33054 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OPARE, JOHN
Address: 19555 NW 29TH COURT
City-St-Zip: MIAMI GARDENS, FL 33055

Title: MGRM () Delete
Name: FREDERICK, CAROLYN
Address: 4316 SW 124TH TERRACE
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: JAMES, SHANTELL
Address: 4316 SW 124TH TERRACE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: FREDERICK, CAROLYN
Address: 12791 S.W. 42ND STREET
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM (X) Change () Addition
Name: JAMES, SHANTELL
Address: 12791 S.W. 42ND STREET
City-St-Zip: MIRAMAR, FL 33027

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: JOHN OPARE

MGRM

07/09/2008

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