

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000005922

Entity Name: POWW-WOW, LLC

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

918 ALFONSO AVENUE  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

918 ALFONSO AVENUE  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 27-0662447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEWART AGENT SERVICES  
2199 PONCE DE LEON BOULEVARD  
SUITE 301  
CORAL GABLE, FL 33134 US

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

LEVINSON, SANDRA  
918 ALFONSO AVENUE  
CORAL GABLES,, FL 33146 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: SANDRA LEVINSON

04/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LEVINSON, SANDRA  
Address: 918 ALFONSO AVENUE  
City-St-Zip: CORAL GABLES, FL 33146

I hereby 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: SANDRA LEVINSON

MGR

04/12/2010

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