

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034664

FILED
May 01, 2009
Secretary of State

Entity Name: G & G ACES LLC

Current Principal Place of Business:

12951 NW 23RD ST.
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

12951 NW 23RD ST.
PEMBROKE PINES, FL 33028 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
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:

LIEBERMAN DANZ & KRONENGOLD
1301 INTERNATIONAL PARKWAY
SUITE 140
FORT LAUDERDALE, FL, FL 33323 US

Name and Address of New Registered Agent:

LIEBERMAN DANZ & KRONENGOLD
1301 INTERNATIONAL PARKWAY
SUITE 140
FORT LAUDERDALE, FL 33323 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:

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GREGORY, DANIEL
Address: 12951 NW 23RD ST.
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: MGRM () Delete
Name: GRAHAM, TODD
Address: 6597 COBIA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

ADDITIONS/CHANGES:

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

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: DANIEL GREGORY

MGRM

05/01/2009

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