

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069704

FILED
Apr 15, 2009
Secretary of State

Entity Name: A&B SERVICES OF THE PALM BEACHES, L.L.C.

Current Principal Place of Business:

2304 SE 3RD ST
BOYNTON BEACH, FL 33435

New Principal Place of Business:

2530 N. ALBATROSS RD UNIT A
BOYNTON BEACH, FL 33435

Current Mailing Address:

2304 SE 3RD ST
BOYNTON BEACH, FL 33435

New Mailing Address:

2530 N. ALBATROSS RD. UNIT A
DELRAY BEACH, FL 33444

FEI Number: 38-3789889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AWAD, NADEEM
2304 SE 3RD ST
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

AWAD, NADEEM
8265 PALM GATE DR
BOYNTON BEACH, FL 33436 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:

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: AWAD, NADEEM
Address: 2304 SE 3RD ST
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VP () Delete
Name: BENTLEY, DOUG
Address: 2304 SE 3RD ST
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: AWAD, NADEEM
Address: 8265 PALM GATE DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP (X) Change () Addition
Name: BENTLEY, DOUG
Address: 2530 N. ALBATROSS RD. UNIT A
City-St-Zip: DELRAY BEACH, FL 33444

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: NADEEM AWAD

PRES

04/15/2009

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