2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 25, 2009
Secretary of State

DOCUMENT# L08000088586

Entity Name: PASTE THE WEST INDIES L.L.C.

Current Principal Place of Business:

1060 LORING DR. APT. G
MERRITT ISLAND, FL 32953

New Principal Place of Business:

1157 BOLLE CIRCLE
ROCKLEDGE, FL 32955

Current Mailing Address:

1060 LORING DR. APT. G
MERRITT ISLAND, FL 32953

New Mailing Address:

1157 BOLLE CIRCLE
ROCKLEDGE, FL 32955

FEI Number: 90-0415171 **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:

CARTER, ROBERTO
1060 LORING DR APT G
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

CARTER, ROBERTO
1157 BOLLE CIRCLE
ROCKLEDGE, FL 32955 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: R. CARTER 08/25/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CARTER, ROBERTO
Address: 1060 LORING DR. APT. G
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CARTER, ROBERTO
Address: 1157 BOLLE CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

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: R. CARTER MGRM 08/25/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date