

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094319

Entity Name: INNOCENT DELIGHTS LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

8750 EXCHANGE DRIVE STE 9
ORLANDO, FL 32766

New Principal Place of Business:

6422 MILNER BV. SUITE 101
ORLANDO, FL 32809

Current Mailing Address:

PO BOX 770278
ORLANDO, FL 328770278

New Mailing Address:

FEI Number: 36-4639431 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:

RODRIGUEZ, SASHA
2115 PAPRIKA DRIVE
ORLANDO, FL 32837 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: RODRIGUEZ, SASHA S
Address: PO BOX 770278
City-St-Zip: ORLANDO, FL 328770278

Title: MGR () Delete
Name: MERCADO, SHEYLA
Address: PO BOX 770278
City-St-Zip: ORLANDO, FL 328770278

Title: MGR () Delete
Name: SOTO, SHARLENE
Address: PO BOX 770278
City-St-Zip: ORLANDO, FL 328770278

ADDITIONS/CHANGES:

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

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: SASHA RODRIGUEZ

MGRM

05/01/2009

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