2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097977

Entity Name: MICHE BAG TAMPA BAY, L.L.C.

13418 OSCAR COURT

City-St-Zip: HUDSON, FL 34669

Address:

FILED Jan 06, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|--|----------------------------|---|--|
| | CAR COURT FL 34669 | | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | CAR COURT FL 34669 | | | |
| FEI Number | : FEIN | umber Applied For() | FEI Number Not Applicable (X) | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | |
| 7608 RIDO | I, DOROTHY E GE ROAD #208G E, FL 33772 US | | | |
| | e named entity submits e of Florida. | s this statement for the p | ourpose of changing its registere | ed office or registered agent, or both |
| SIGNATU | RE: | | | |
| | Electronic Sign | ature of Registered Age | ent | Date |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | MGR () Delete CAPONE, PHILIP L 13418 OSCAR COURT HUDSON, FL 34669 | | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: | MGRM () Delete | | Title: Name: | () Change () Addition |

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: PHILIP L. CAPONE MGR 01/06/2009