

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098761

FILED
Jun 20, 2009
Secretary of State

Entity Name: SHALOM KIDS INTERNATIONAL, LLC

Current Principal Place of Business:

856 GRAND REGENCY POINT #202
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

4070 TAGGART CAY NORTH
#101
SARASOTA, FL 34233 US

Current Mailing Address:

856 GRAND REGENCY POINT #202
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

4070 TAGGART CAY NORTH
#101
SARASOTA, FL 34233 US

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:

EVANS, TERRI
856 GRAND REGENCY POINT #202
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

EVANS, TERRI MRS
4070 TAGGART CAY NORTH
#101
SARASOTA, FL 34233 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: TERRI LYNN EVANS

06/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EVANS, TERRI
Address: 856 GRAND REGENCY POINT #202
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EVANS, TERRI MRS.
Address: 4070 TAGGART CAY NORTH
City-St-Zip: SARASOTA, FL 34233 US

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: TERRI LYNN EVANS

MRS.

06/20/2009

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