

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110631

Entity Name: CHILD-PASS, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

309 MALLARD ROAD
WESTON, FL 33327 US

New Principal Place of Business:

Current Mailing Address:

309 MALLARD ROAD
WESTON, FL 33327 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ABELS, BARBARA C
309 MALLARD ROAD
WESTON, FL 33327 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: ABELS, BARBARA C
Address: 309 MALLARD ROAD
City-St-Zip: WESTON, FL 33327 US

Title: MGRM () Delete
Name: ABELS, IRA H
Address: 309 MALLARD ROAD
City-St-Zip: WESTON, FL 33327 US

Title: MGRM () Delete
Name: SICA, NANCY
Address: 14971 SW 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

Title: MGRM () Delete
Name: SICA, AURELIO
Address: 14971 SW 43RD TERRACE
City-St-Zip: MIAMI, FL 33185 US

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:

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: BARBARA ABELS

MGM

05/01/2009

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