

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000111321

FILED
Jun 23, 2009
Secretary of State

Entity Name: SOREL ENTERPRISES LLC

Current Principal Place of Business:

840 NW 86TH AVENUE
427
PLANTATION, FL 33324

New Principal Place of Business:

8991 SW 8TH STREET
PLANTATION, FL 33324

Current Mailing Address:

840 NW 86TH AVENUE
427
PLANTATION, FL 33324

New Mailing Address:

8991 SW 8TH STREET
PLANTATION, FL 33324

FEI Number: 26-3822211 FEI Number Applied For () FEI Number Not Applicable () 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:

SOREL, KYLE H
840 NW 86TH AVENUE
427
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

SOREL, KYLE H
8991 SW 8TH STREET
PLANTATION, FL 33324 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: KYLE SOREL

06/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOREL, KYLE H
Address: 840 NW 86TH AVENUE APT. 427
City-St-Zip: PLANTATION, FL 33324 US

Title: MGRM () Delete
Name: SOREL, MICHAEL A
Address: 8991 SW 8TH STREET
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES:

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: KYLE SOREL

MR

06/23/2009

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