

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113877

FILED
May 19, 2009
Secretary of State

Entity Name: C&S HOLDINGS GROUP, LLC

Current Principal Place of Business:

517 NE 11TH AVE
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

517 NE 11TH AVE
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 26-3939282 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:

Name and Address of New Registered Agent:

SHANNON, CLIFFORD
517 NE 11TH AVE
POMPANO BEACH, FL 33060 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHANNON, CLIFFORD
Address: 517 NE 11TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM () Delete
Name: CHAVEZ, DINA
Address: 1143 NW 15TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: MGRM () Delete
Name: VELEZ-ALICEA, YESENIA
Address: 5661 NE 18TH AVE. APT. 217
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: S () Delete
Name: CHAVEZ, DINA
Address: 1143 NW 15TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: S () Delete
Name: VELEZ-ALICEA, YESENIA
Address: 5661 NE 18TH AVE. APT. 217
City-St-Zip: FORT LAUDERDALE, FL 33334

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:

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: CLIFFORD SHANNON

MGR

05/19/2009

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