

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000056047

FILED  
Mar 09, 2011  
Secretary of State

Entity Name: CREAM PUFFS LLC

**Current Principal Place of Business:**

16500 COLLINS AVENUE  
SUITE 651  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

1652 NE 205 TERRACE  
MIAMI, FL 33179

**Current Mailing Address:**

16500 COLLINS AVENUE  
SUITE 651  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

1652 NE 205 TERRACE  
MIAMI, FL 33179

FEI Number: 27-2660876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

STUS, ERENA  
16500 COLLINS AVENUE  
SUITE 651  
SUNNY ISLES BEACH, FL 33160 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: MGR  
Name: STUS, ERENA  
Address: 16500 COLLINS AVENUE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR  
Name: SARKISIAN, LAURA  
Address: 19464 39TH. AVENUE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM  
Name: BEST PRODUCER LLC  
Address: 19575 BISCAYNE BOULEVARD KIOSK-1930  
City-St-Zip: AVENTURA, FL 33180

I hereby 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: ERENA STUS

MGR

03/09/2011

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