

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000063365

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** ARB MARKETING GROUP, LLC

**Current Principal Place of Business:**

5111 NE 6TH AVENUE  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

2500 HOLLYWOOD BLVD  
SUITE 209  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

PO BOX 177  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

2500 HOLLYWOOD BLVD  
209  
HOLLYWOOD, FL 33020

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CLERVEAUX, LUNISE  
2410 NE 6TH AVENUE  
POMPANO BEACH, FL 33064 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: BONNY, JOSE  
Address: 1803 ARBOR DRIVE  
City-St-Zip: DULUTH, GA 30096

Title: MGRM  
Name: CLERVEAUX, LUNISE  
Address: 5111 NE 6TH AVENUE  
City-St-Zip: POMPANO BEACH, FL 33064

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: LUNISE CLERVEAUX

PRES

04/30/2011

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