

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000065248

**FILED**  
**Mar 07, 2011**  
**Secretary of State**

**Entity Name:** FRENCH BB, LLC

**Current Principal Place of Business:**

319 CHARROUX DRIVE  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

622 NORTH FLAGLER DRIVE  
301  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

319 CHARROUX DRIVE  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

622 NORTH FLAGLER DRIVE  
301  
WEST PALM BEACH, FL 33401

**FEI Number:** 61-1618052

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, GREGORY R  
712 U.S. HIGHWAY ONE  
STE 400  
NORTH PALM BEACH, FL 33408 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  
**Name:** KAMINESTER, JOEL  
**Address:** 622 NORTH FLAGLER DR., APT. 301  
**City-St-Zip:** WEST PALM BEACH, FL 33401

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:** JOEL KAMINESTER

MG

03/07/2011

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