

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000103899

FILED
Apr 18, 2012
Secretary of State

Entity Name: ABSORBENT BREAST CUSHIONS LLC

Current Principal Place of Business:

264 EGRET DRIVE
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

264 EGRET DRIVE
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 45-3639010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: REYNOLDS, JAMES
Address: 264 EGRET DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: MGR
Name: REYNOLDS, LINDA
Address: 264 EGRET DRIVE
City-St-Zip: HAINES CITY, FL 33844

Title: S
Name: REYNOLDS, LINDA
Address: 264 EGRET DRIVE
City-St-Zip: HAINES CITY, FL 33844

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: JAMES ALLEN REYNOLDS

MGR

04/18/2012

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