

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # M00000001488**

1. Entity Name  
**LTBB MARKETING, LLC**



Principal Place of Business

**4150 S. LAPEER RD  
ORION, MI 48359**

Mailing Address

**4150 S. LAPEER RD  
ORION, MI 48359**



03242008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**38-3519690**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BUSCH, GARY  
60 OCEAN BLVD SUITE 5  
ATLANTIC BEACH, FL 32233**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

U000000876150  
04/11/08-80061-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BUSCH, GARY
STREET ADDRESS	60 OCEAN BLVD SUITE 5
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	MGR
NAME	BEENEN, GREG
STREET ADDRESS	60 OCEAN BLVD SUITE 5
CITY-ST-ZIP	ATLANTIC BEACH, FL 32233
TITLE	MGR
NAME	LYMTAL INTERNATIONAL, INC.
STREET ADDRESS	4150 S. LAPEER RD.
CITY-ST-ZIP	ORION, MI 48359

**DO NOT WRITE  
IN THIS SPACE**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** \_\_\_\_\_

**Magdy Talaat**

**March 24, 2008**

**248-373-8100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #