

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000700

FILED
May 02, 2009
Secretary of State

Entity Name: PB BLANKETS LLC

Current Principal Place of Business:

210 ALMERIA AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

1751 WEST FLAGLER STREET
6
CORAL GABLES, FL 33135

Current Mailing Address:

210 ALMERIA AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

1751 WEST FLAGLER STREET
6
CORAL GABLES, FL 33135

FEI Number: 06-1694460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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 () Delete
Name: BLANC, MARGHERITA
Address: 210 ALMERIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: HALFORD, MARY ANN
Address: 28 BEACH LANE
City-St-Zip: TARRYTOWN, NY 10591

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLANC, MARGHERITA
Address: 1751 WEST FLAGLER STREET, STE 6
City-St-Zip: MIAMI, FL 33135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARGHERITA BLANC

MGRM

05/02/2009

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