

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000003807

FILED
Apr 11, 2008
Secretary of State

Entity Name: PUREEFFECTS LLC

Current Principal Place of Business:

16964 FOX TRAIL LANE
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

16964 FOX TRAIL LANE
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-2520431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENDER, KIM
16964 FOX TRAIL LANE
LOXAHATCHEE, FL 33470 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: FENDER, KIM
Address: 16964 FOX TRAIL LANE
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

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: KIM FENDER

MGRM

04/11/2008

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