## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

11 - WY - WY BUT

## **DOCUMENT # M07000003743**

1. Entity Name

**B & L ENTERPRISE GROUP LLC** 



**FILED** Feb 28, 2008 08:00 AM Secretary of State

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Principal Place of Business

Mailing Address

101 CONVENTION CENTER DRIVE STE 700 LAS VEGAS, NV 89109

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02112008 No Chg-LLC-

CR2E083 (12/07)

4. FEI Number 41-2238683

Applied For Not Applicable

5. Certificate of Status Desired

DATE

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

AHRENS, LETTY L 25756 WHISTLE STOP SEBRING, FL 33872



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.

(NOTE: Registered Agent signature required when reinstating)

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

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AHRENS, ROBERT E 2756 WHISTLE STOP SEBRING, FL 33872	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AHRENS, LETTY L 2756 WHISTLE STOP SEBRING, FL 33872	000000843358 03/11/08-80066-015 143:75
TITLE NAME STREET ADDRESS CITY+ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
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.