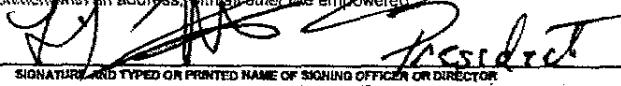


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000018862 1. Entity Name L.L.B. MARKETING ENTERPRISES, INC.		
Principal Place of Business 5001 S UNIVERSITY DR SUITE H DAVIE, FL 33328		Mailing Address 5001 S UNIVERSITY DR SUITE H DAVIE, FL 33328
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BREGGETT, LIONEL L 5001 S UNIVERSITY DRIVE SUITE 4 DAVIE, FL 33328		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 \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
		1000000298550 04/11/05-80068-021 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIONEL BREGSTEIN BREGGETT 5001 S UNIVERSITY DR SUITE H DAVIE, FL	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, without ever being empowered.		
SIGNATURE: 		4-8-05 854 134 8660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #



02212005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0470035	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**