

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000079768

**Entity Name:** BAR CODE EQUIPMENT SERVICE, LLC

**Current Principal Place of Business:**

315 THIRD AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

315 THIRD AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250

**FEI Number: 86-1120013**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROSE, BOBBY BSR.  
131 10TH AVENUE NORTH  
JACKSONVILLE BEACH, FL 32250 US

*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

**Authorized Person(s) Detail :**

Title            CEO  
Name            ROSE, BOBBY BSR  
Address        315 THIRD AVENUE NORTH  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title            MGR  
Name            ROSE, MAUDEANNA A  
Address        315 THIRD AVENUE N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MAUDEANNA ROSE**

**MANAGER**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date