

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048737

FILED
Mar 23, 2009
Secretary of State

Entity Name: CENTAVE GROUP, LLC

Current Principal Place of Business:

130 72ND STREET NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

130 72ND STREET NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 20-1338988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LY, ERIKA K
130 72ND STREET NORTH
ST. PETERSBURG, FL 33710 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: LY, JACQUELINE T MRS
Address: 130 72ND STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGRM () Delete
Name: LY-FLORES, SANDRA K MRS.
Address: 255 73RD STREET S
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGRM () Delete
Name: LY, THE T MR.
Address: 130 72ND STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGRM () Delete
Name: HSU, YEN-WEN P MR
Address: 130 72ND STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGRM () Delete
Name: LY, ERIKA K MS
Address: 130 72ND STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES:

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

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

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

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

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: ERIKA K LY

MS.

03/23/2009

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