

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122912

Entity Name: AMIGOS PASCO, LLC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

902 NORTH HIMES AVENUE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

902 NORTH HIMES AVENUE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 54-2191171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGHAM, FREDERICK A JR, ESQ
C/O DIVITO & HIGHAM, P.A.
4514 CENTRAL AVE.
ST. PETERSBURG, FL 33711 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: ALLISON, JAY
Address: 902 NORTH HIMES AVENUE
City-St-Zip: TAMPA, FL 33609

Title: MBRM () Delete
Name: GARCIA, ROBERTO
Address: 902 NORTH HIMES AVE
City-St-Zip: TAMPA, FL 33609

Title: MBRM () Delete
Name: COHN, DOUGLAS B
Address: 902 NORTH HIMES AVE
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: GARCIA, ROBERTO
Address: 902 NORTH HIMES AVE
City-St-Zip: TAMPA, FL 33609

Title: MGRM (X) Change () Addition
Name: G & J ENTERPRISES, LLP
Address: 902 NORTH HIMES AVE
City-St-Zip: TAMPA, FL 33609

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: JAY ALLISON

MGRM

04/21/2009

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