

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000035745

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** FLOREZ CONSULTANTS, LLC

**Current Principal Place of Business:**

663 CARRINGTON LANE  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

663 CARRINGTON LANE  
WESTON, FL 33326

**New Mailing Address:**

**FEI Number:** 11-3775875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAUL SALVER, PA  
2721 EXECUTIVE PARK DRIVE, SUITE 3  
WESTON, FL 33331 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: MGR ( ) Delete  
Name: FLOREZ, OTONIEL  
Address: 663 CARRINGTON LANE  
City-St-Zip: WESTON, FL 33326

Title: MGR ( ) Delete  
Name: NICOLAIDIS, ROMY  
Address: 663 CARRINGTON LANE  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES:**

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: OTONIEL FLOREZ

MGR

04/30/2009

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