

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000041017

**FILED**  
**Apr 17, 2008**  
**Secretary of State**

**Entity Name:** CARLOS J. RODRIGUEZ, LLC

**Current Principal Place of Business:**

1971 ESTANCIA CIRCLE  
12C  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

1387 MEADOWBROOK ST.  
KISSIMMEE, FL 34744 US

**Current Mailing Address:**

1971 ESTANCIA CIRCLE  
12C  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

1387 MEADOWBROOK ST.  
KISSIMMEE, FL 34744 US

**FEI Number:** 20-4725154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ, CARLOS J  
1971 ESTANCIA CIRCLE  
12C  
KISSIMMEE, FL 34741 US

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

RODRIGUEZ, CARLOS J  
1387 MEADOWBROOK ST.  
KISSIMMEE, FL 34744 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: \_\_\_\_\_

04/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: RODRIGUEZ, CARLOS J  
Address: 1971 ESTANCIA CIRCLE, 12C  
City-St-Zip: KISSIMMEE, FL 34741 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: RODRIGUEZ, CARLOS J  
Address: 1387 MEADOWBROOK ST.  
City-St-Zip: KISSIMMEE, FL 34744 US

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: CARLOS J RODRIGUEZ

MGRM

04/17/2008

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