

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109823

Entity Name: NERI L MARTINEZ,LLC.

FILED  
Jan 10, 2007  
Secretary of State

**Current Principal Place of Business:**

456 WEST DAVIS BLVD  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

456 WEST DAVIS BLVD  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

MARTINEZ, NERI L  
2314 DR MARTINEZ LUTHER KING BLVD  
TAMPA, FL 33607 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: MARTINEZ, NERI L  
Address: 456 WEST DAVIS BLVD  
City-St-Zip: TAMPA, FL 33606 US

Title: MGR ( ) Delete  
Name: DEL VALLE, SUSAN T  
Address: 456 WEST DAVIS BLVD  
City-St-Zip: TAMPA, FL 33606 US

**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 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: NERI L MARTINEZ                      MGRM                      01/10/2007

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