2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# L07000110987

Entity Name: UNLIMITED I & E, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
13309 SPROSTON POINT ORLANDO, FL 32832	

Current Mailing Address:	**New Mailing Address:**
13309 SPROSTON POINT ORLANDO, FL 32832	

FEI Number: 26-1340883   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SILVA'S ENTERPRISE, INC. 5220 S UNIVERSITY DR SUITE C-102 DAVIE, FL 33328 US	ROMERO, JONATHAN 13309 SPROSTON POINT ORLANDO, FL 32832 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: JONATHAN ROMERO   01/08/2009
_____
            Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title: ( ) Change ( ) Addition
Name:	FIGUERA, CARLOS	Name:
Address:	13309 SPROSTON POINT	Address:
City-St-Zip:	ORLANDO, FL 32832	City-St-Zip:

Title:	MGRM ( ) Delete	Title: ( ) Change ( ) Addition
Name:	ROMERO, YOOLMAR	Name:
Address:	13309 SPROSTON POINT	Address:
City-St-Zip:	ORLANDO, FL 32832	City-St-Zip:

Title:	( ) Delete	Title: MGRM ( ) Change (X) Addition
Name:		Name: ROMERO, JONATHAN
Address:		Address: 13309 SPROSTON POINT
City-St-Zip:		City-St-Zip: ORLANDO, FL 32832

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: JONATHAN ROMERO   MGRM   01/08/2009
_____
      Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date