

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000032134

FILED
Jun 26, 2009
Secretary of State

Entity Name: SYNERGY SOUND & PROTECTION, LLC

Current Principal Place of Business:

1055 NW 127 ST
MIAMI, FL 33167

New Principal Place of Business:

14631 NW 27 AVE
OPALOCKA, FL 33054

Current Mailing Address:

1055 NW 127 ST
MIAMI, FL 33167

New Mailing Address:

14631 NW 27 AVE
OPALOCKA, FL 33054

FEI Number: 26-2295419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MORALES ORELLANA, ELIEZER
1055 NW 127 ST
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

ORELLANA, ELIEZER M
14631 NW 27 AVE
OPALOCKA, FL 33054 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: ELIEZER ORELLANA

06/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MORALES ORELLANA, ELIEZER
Address: 1055 NW 127 ST
City-St-Zip: MIAMI, FL 33167

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MORALES ORELLANA, ELIEZER
Address: 14631 NW 27 AVE
City-St-Zip: OPALOCKA, FL 33054

Title: MGR () Change (X) Addition
Name: FERRER, ANA
Address: 145 E 4 ST #3
City-St-Zip: HIALEAH, FL 33010

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: ANA FERRER

MGR

06/26/2009

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