

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000065426

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** MASTER IRRIGATION & SERVICES, LLC

**Current Principal Place of Business:**

13295 NW 107TH AVE, UNIT B  
HIALEAH GARDENS, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

13295 NW 107TH AVE, UNIT B  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

**FEI Number:** 27-2975029      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PIEDRA, OSCAR  
13295 NW 107TH AVE, UNIT B  
HIALEAH GARDENS, FL 33018      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  
**Name:** PIEDRA, OSCAR  
**Address:** 13295 NW 107TH AVE, UNIT B  
**City-St-Zip:** HIALEAH GARDENS, FL 33018

**Title:** MGRM  
**Name:** PIEDRA, OMAR  
**Address:** 13295 NW 107TH AVE, UNIT B  
**City-St-Zip:** HIALEAH GARDENS, FL 33018

I hereby 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: OMAR PIEDRA

MGRM

04/24/2012

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