

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000084606

**FILED**  
**Jan 07, 2012**  
**Secretary of State**

**Entity Name:** RESURRECTION REFACING LLC

**Current Principal Place of Business:**

9431 LIVE OAK PLACE  
APT. 104  
DAVIE, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

9431 LIVE OAK PLACE  
APT. 104  
DAVIE, FL 33324 US

**New Mailing Address:**

**FEI Number:** 27-3447270      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GOLDFARB, PETER  
9431 LIVE OAK PLACE  
APT. 104  
DAVIE, FL 33324 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:** PRES  
**Name:** GOLDFARB, PETER  
**Address:** 9431 LIVE OAK PLACE APT.104  
**City-St-Zip:** DAVIE, FL 33324 US

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: PETER GOLDFARB      PRES      01/07/2012

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