

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000024781

Entity Name: ST. LOUIS PLAZA, L.L.C.

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4114 W. NORTH B STREET  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 271058  
TAMPA, FL 33688

**New Mailing Address:**

FEI Number: 65-1279509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SALEM, ALBERT M JR.  
4600 WEST KENNEDY BLVD.  
TAMPA, FL 33609 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: GILBERTO E VEGA, TRUSTEE  
Address: P.O. BOX 271058  
City-St-Zip: TAMPA, FL 33688

Title: MGRM  
Name: ILONA M. COYA DE VEGA, TRUSTEE  
Address: P.O. BOX 271058  
City-St-Zip: TAMPA, FL 33688

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: GILBERTO E. VEGA (TRUSTEE)

MGRM

02/01/2011

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