

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010515

Entity Name: STILL WAVE, L.L.C.**Current Principal Place of Business:**13243 SOBRADO DR.
ORLANDO, FL 32837**Current Mailing Address:**13243 SOBRADO DR.
ORLANDO, FL 32837 US**FEI Number:** 65-1117654**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HENRIQUES, GREGORIO H
13243 SOBRADO DR
ORLANDO, FL 32837 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title MGRM
Name ADMINISTRADORA ANYOGRELI II,
C.A.
Address CALLE EL PLACER QUINTA
ANYOGRELI
City-State-Zip: CHARALLAVE MIRANDA 1210

Title MGRM
Name HENRIQUEZ, LILIA D.
Address CALLE EL PLACER QUINTA
ANYOGRELI
City-State-Zip: CHARALLAVE MIRANDA 1210

Title MGRM
Name HENRIQUES, GREGORIO
Address 13243 SOBRADO DR.
City-State-Zip: ORLANDO FL 32837

Title MGRM
Name HENRIQUES , ANGELA M.
Address CALLE EL PLACER QUINTA
ANYOGRELI
City-State-Zip: CHARALLAVE MIRANDA 1210

Title MGRM
Name HENRIQUEZ, MARIA Y
Address CALLE EL PLACER QUINTA
ANYOGRELI
City-State-Zip: CHARALLAVE MIRANDA 1210

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREGORIO HENRIQUES

MGRM

04/24/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date