

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000080367

**Entity Name:** A1 BOAT CARE LLC

**Current Principal Place of Business:**

1770 NORTH BAYSHORE DR  
APT 17  
MIAMI , FL 33132

**FILED**  
**Apr 15, 2013**  
**Secretary of State**  
**CC6852665653**

**Current Mailing Address:**

1770 NORTH BAYSHORE DR  
APT 17  
MIAMI , FL 33132 US

**FEI Number:** 80-0828836

**Certificate of Status Desired:** No

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

AGUIRRE, FREDY  
1770 NORTH BAYSHORE DR  
APT 17  
MIAMI , FL 33132 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 MGR  
Name AGUIRRE, FREDY  
Address 1770 NORTH BAYSHORE DR  
APT 17  
City-State-Zip: MIAMI FL 33132

*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:** FREDY AGUIRRE

**MANAGER**

**04/15/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date