

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000123049

Entity Name: GASKET SPECIALTIES AND RESTORATIONS LLC

Current Principal Place of Business:

748 COMMERCE CIRCLE
UNIT 28
LONGWOOD, FL 32750

Current Mailing Address:

748 COMMERCE CIRCLE
UNIT 28
LONGWOOD, FL 32750

FEI Number: 46-1062334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMK ACCOUNTING SERVICES INC
274 WILSHIRE BLVD
221
CASSELBERRY, FL 32707 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 FLAVIN, PHILIP S
Address 431 E CHURCH AVENUE
City-State-Zip: LONGWOOD FL 32750

Title MGR
Name FLAVIN, JAMES P
Address 2462 FALMOUTH ROAD
City-State-Zip: MAITLAND FL 32751

Title MGR
Name FLAVIN, ANN A
Address 2462 FALMOUTH ROAD
City-State-Zip: MAITLAND FL 32751

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: PHILIP S FLAVIN

MGRM

08/27/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date