

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000123049

Entity Name: GASKET SPECIALTIES AND RESTORATIONS LLC

Current Principal Place of Business:

744 COMMERCE CIRCLE
LONGWOOD, FL 32750

Current Mailing Address:

744 COMMERCE CIRCLE
LONGWOOD, FL 32750 US

FEI Number: 46-1062334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMK ACCOUNTING SERVICES INC
226 WILSHIRE BLVD
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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHILIP FLAVIN

MGRM

01/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date