

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000009275

Entity Name: M & E SERVICES, L.C.

**FILED**  
**Mar 16, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

5876 IRLO BROSON  
KISSIMMEE, FL 34747

**New Principal Place of Business:**

5873 WEST IRLO BRONSON  
MEMORIAL HWY  
KISSIMMEE, FL 34746

**Current Mailing Address:**

14808 LONE EAGLE DRIVE  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 59-3692453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VALDIVIA, MARTA  
14808 LONE EAGLE DRIVE  
ORLANDO, FL 32837 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 ( ) Delete  
Name: VALDIVIA, EVER  
Address: 2250 STONEMILL DR  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VALDIVIA, EVER  
Address: 2345 SETTLERS TRL  
City-St-Zip: ORLANDO, FL 32837

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARTA VALDIVIA

P

03/16/2007

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