

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010515

FILED
Feb 12, 2009
Secretary of State

Entity Name: STILL WAVE, L.L.C.

Current Principal Place of Business:

13243 SOBRADO DR.
ORLANDO, FL 32837 US

New Principal Place of Business:

Current Mailing Address:

13243 SOBRADO DR.
ORLANDO, FL 32837 US

New Mailing Address:

FEI Number: 65-1117654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRIQUES, GREGORIO H
13243 SOBRADO DR
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: ADMINISTRADORA ANYOG, RELI II, C.A.
Address: CANE EL PIACER QTA. ANVOGRELI
City-St-Zip: CHARALLAVE EDO MIRANDA VZ, 1210

Title: MGRM () Delete
Name: HENRIQUES GONCALVES, ANGELA MARIA
Address: C GUSTAVO FARRERA CONS RES EL CAMPITO
City-St-Zip: CHARALLAVE MIRANDA VZ, 3AP33

Title: MGRM () Delete
Name: GONCALVEZ, LILLA H
Address: CSQ PALO BLANCO A ST. TOYAS RES BESCU PISO
City-St-Zip: CARACAS DIJO CAPITAL 1010 VZ, 3AP32

Title: MGRM () Delete
Name: HENRIQUEZ, MARIA
Address: C GHUCHO AROCHA #56 URB COLINAS DC ST ROSA
City-St-Zip: CHARALLAVE MIRANDA VZ, 1210

Title: MGRM () Delete
Name: HENRIQUES, GREGORIO
Address: 13243 SOBRADO DR.
City-St-Zip: ORLANDO, FL 32837 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GREGORIO HENRIQUES

MGRM

02/12/2009

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