

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019590

FILED  
Jul 01, 2006  
Secretary of State

Entity Name: ASER, L.L.C.

**Current Principal Place of Business:**

10 WATER STREET  
WINCHESTER, MA 01890

**New Principal Place of Business:**

**Current Mailing Address:**

10 WATER STREET  
WINCHESTER, MA 01890

**New Mailing Address:**

FEI Number: 65-1152856      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ROTH, LEONARDO A ESQ.  
3440 HOLLYWOOD BLVD.  
STE 360  
HOLLYWOOD, FL 33021 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ACOSTA, EDUARDO  
Address: 10 WATER STREET  
City-St-Zip: WINCHESTER, MA 01890

Title: MGRM ( ) Delete  
Name: SERAFINI, MARIA E  
Address: 10WATER ST  
City-St-Zip: WINCHESTER, MA 01890

**ADDITIONS/CHANGES:**

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 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: EDUARDO ACOSTA

MGRM

07/01/2006

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