

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000099

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MIKE'S DIVE SERVICES, L.L.C.

**Current Principal Place of Business:**

4919 MEMORIAL HIGHWAY  
SUITE 200  
TAMPA, FL 33634

**New Principal Place of Business:**

4002 W STATE STREET  
SUITE 200  
TAMPA, FL 33609

**Current Mailing Address:**

4919 MEMORIAL HIGHWAY  
SUITE 200  
TAMPA, FL 33634

**New Mailing Address:**

4002 W STATE STREET  
SUITE 200  
TAMPA, FL 33609

**FEI Number:** 01-0675696

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ECHEVARRIA, MICHAEL J ESQUIRE  
4919 MEMORIAL HIGHWAY  
SUITE 200  
TAMPA, FL 33634 US

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

ECHEVARRIA, MICHAEL J ESQUIRE  
4002 W STATE STREET  
SUITE 200  
TAMPA, FL 33609 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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ECHEVARRIA, MICHAEL J  
Address: 4002 W STATE STREET SUITE 200  
City-St-Zip: TAMPA, FL 33609

I hereby 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: MICHAEL J ECHEVARRIA

MGR

04/30/2012

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