

# **2005 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000006164

Entity Name: ANG&GAB, LLC

**FILED**  
**Feb 02, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

199 BURNT PINE DRIVE  
NAPLES, FL 34119

**New Principal Place of Business:**

3 FORMOSA AVENUE  
TAMPA, FL 33606

**Current Mailing Address:**

199 BURNT PINE DRIVE  
NAPLES, FL 34119

**New Mailing Address:**

3 FORMOSA AVENUE  
TAMPA, FL 33606

FEI Number: 20-2265848      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

BUSINESS FILINGS INCORPORATED  
660 EAST JEFFERSON STREET  
TALLAHASSEE, FL 323010000 US

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

DIMARCO, LISA  
3 FORMOSA AVENUE  
TAMPA, FL 33606 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: LISA DIMARCO

02/02/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: DIMARCO, STEPHEN  
Address: 199 BURNT PINE DRIVE  
City-St-Zip: NAPLES, FL 34119

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DIMARCO, STEPHEN  
Address: 3 FORMOSA AVENUE  
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEPHEN DIMARCO

MGRM

02/02/2005

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