## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012828

Entity Name: THE ACCOUNTING FIRM, LLC

FILED Apr 28, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1465 N.W. 97 AVE. 7220 N.W. 36TH STREET MIAMI, FL 33172

SUITE 624

MIAMI, FL 33166

**Current Mailing Address: New Mailing Address:** 

1465 N.W. 97 AVE. 7220 N.W. 36TH STREET

MIAMI, FL 33172 SUITE 624 MIAMI, FL 33166

FEI Number: 20-0046586 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DAL FARRA, JUDITH CPA DEL LUPO, LUCIANO 7220 N.W. 36TH STREET 1465 N.W. 97 AVE. MIAMI, FL 33172 SUITE 624 MIAMI, FL 33166 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: LUCIANO DEL LUPO 04/28/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition Name: Name:

DAL FARRA, JUDITH CPA DEL LUPO, LUCIANO Address: 1465 N.W. 97 AVE. Address: 7220 N.W. 36TH STREET, SUITE 624

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33166

Title: MGRM (X) Delete Title: () Change () Addition

DEL LUPO, LUCIANO Name: Name: Address: 1465 N.W. 97 AVE. Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip:

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: LUCIANO DEL LUPO **MGRM** 04/28/2005