

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000018621

Entity Name: EMERGENCY ICE LLC

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5081 SOUTH STATE ROAD 7  
SUITE 809  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

5081 SOUTH STATE ROAD 7  
SUITE 809  
DAVIE, FL 33314

**New Mailing Address:**

FEI Number: 54-2111540

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABUCHAIBE, YAVE  
5081 SOUTH STATE ROAD 7  
SUITE 809  
DAVIE, FL 33314 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  
Name: ABUCHAIBE, YAVE  
Address: 5081 SOUTH STATE ROAD 7 SUITE 809  
City-St-Zip: DAVIE, FL 33314

Title: MGR  
Name: FAYAD, JENNY  
Address: 5081 SOUTH STATE ROAD 7 SUITE 809  
City-St-Zip: DAVIE, FL 33314

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: YAVE ABUCHAIBE

MGR

04/23/2012

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