

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038349

Entity Name: REMORCA, LLC

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

722 EAST LAKE ROAD
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

722 EAST LAKE ROAD
TARPON SPRINGS, FL 34689 US

New Mailing Address:

1594 GREENLEAF COURT
TOMS RIVER, NJ 08753 US

FEI Number: 02-0708693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMORCA, SYLVESTER
722 EAST LAKE ROAD
TARPON SPRINGS, FL 34689 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: P () Delete
Name: REMORCA, SYLVESTER
Address: 722 EAST LAKE ROAD
City-St-Zip: TARPON SPRINGS, FL 34689

Title: T () Delete
Name: REMORCA, CAROLINA
Address: 1594 GREENLEAFF COURT
City-St-Zip: TOMS RIVER, NJ 08753

Title: S () Delete
Name: TIOSECO, CRISTINA
Address: 2075 RAINBOW DRIVE
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: REMORCA, SYLVESTER
Address: 1594 GREENLEAF COURT
City-St-Zip: TOMS RIVER, NJ 08753

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 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: SYLVESTER REMORCA

PRES

03/11/2009

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