

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047345

Entity Name: YOESLANDY POMBO LLC

FILED
Jun 20, 2006
Secretary of State

Current Principal Place of Business:

8705 N MEADOWVIEW CIRCLE
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

8705 N MEADOWVIEW CIRCLE
TAMPA, FL 33625

New Mailing Address:

FEI Number: 20-0978976 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:

SMALL BUSINESS ACCOUNTING SERVICES
16017 N FLORIDA AVE
129
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

POMBO, YOESLANDY
8705A N MEADOWVIEW CIRCLE
TAMPA, FL 33625 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: YOESLANDY POMBO

06/20/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: YORSLANDY, POMBO
Address: 8705 N MEADOWVIEW CIRCLE
City-St-Zip: TAMPA, FL 33625

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POMBO, YOESLANDY
Address: 8705 N MEADOWVIEW CIRCLE
City-St-Zip: TAMPA, FL 33625 US

Title: MGR () Change (X) Addition
Name: AGUILA, EDUARDO
Address: 3410 WINDSOR COURT
City-St-Zip: TAMPA, FL 33614 US

I hereby certify that the information supplied with this filing does not qualify for the 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: YOESLANDY POMBO

MGR

06/20/2006

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