

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069050

FILED  
Aug 31, 2005  
Secretary of State

Entity Name: MARELLI INTERIOR SOLUTION, LLC

**Current Principal Place of Business:**

869 DOVE AVE  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

869 DOVE AVE  
ROCKLEDGE, FL 32955

**New Mailing Address:**

FEI Number: 13-4287189      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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

MARELLI, LUIS E MGR  
869 DOVE AVE.  
ROCKLEDGE, FL 32955 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: LUIS MARELLI

08/31/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MARELLI, MIREYA C  
Address: 869 DOVE AVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR ( ) Delete  
Name: MARELLI, LUIS E  
Address: 869 DOVE AVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: ST ( ) Delete  
Name: MARELLI, LUIS E  
Address: 869 DOVE AVE  
City-St-Zip: ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: LUIS MARELLI

MGR

08/31/2005

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