

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000087382

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** TWENTY TWO TWENTY EIGHT, LLC

**Current Principal Place of Business:**

18517 WISTERIA RD  
FORT MYERS, FL 33967 US

**New Principal Place of Business:**

**Current Mailing Address:**

18517 WISTERIA RD  
FORT MYERS, FL 33967 US

**New Mailing Address:**

**FEI Number:** 04-3800635

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRINA, CATERINA  
18517 WISTERIA RD  
FORT MYERS, FL 33967 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:** BRINA, CATERINA  
**Address:** 18517 WISTERIA RD  
**City-St-Zip:** FORT MYERS, FL 33967 US

**Title:** MGRM  
**Name:** BRINA, MARIO  
**Address:** 18517 WISTERIA RD  
**City-St-Zip:** FORT MYERS, FL 33967 US

**Title:** MGRM  
**Name:** BRINA, CARMEN  
**Address:** 18517 WISTERIA RD  
**City-St-Zip:** FORT MYERS, FL 33967 US

**Title:** MGRM  
**Name:** BRINA, ANTONIO  
**Address:** 18517 WISTERIA RD  
**City-St-Zip:** FORT MYERS, FL 33967

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:** CATERINA BRINA

MNGR

04/27/2011

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