

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062264

FILED
Apr 30, 2008
Secretary of State

Entity Name: TORO ACCOUNTING & CONSULTING SERVICES, LLC

Current Principal Place of Business:

140 N WESTMONTE DR,
200
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

New Mailing Address:

140 N WESTMONTE DR,
200
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

5041 STONEBARK COVE
SANFORD, FL 32771

FEI Number: 20-3036650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORO, CESAR A
5041 STONE BARK COVE
SANFORD, FL 32771 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 () Delete
Name: TORO, CESAR A
Address: 5041 STONEBARK COVE
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: JIMENEZ, MARGARITA
Address: 5041 STONEBARK COVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES:

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: CESAR A TORO

MM

04/30/2008

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