

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092400

Entity Name: MERCAMERICAS, LLC

FILED
Apr 26, 2008
Secretary of State

Current Principal Place of Business:

4260 GULF SHORE BLVD N
NAPLES, FL 34103

Current Mailing Address:

4260 GULF SHORE BLVD N
NAPLES, FL 34103

New Principal Place of Business:

26455 OLD 41 RD
UNIT # 14
BONITA SPRINGS, FL 34135 US

New Mailing Address:

26455 OLD 41 RD
UNIT 14
BONITA SPRINGS, FL 34135 US

FEI Number: 59-3816257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCE, LUIS A
4260 GULF SHORE BLVD N
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

ARCE, LUIS A
26455 OLD 41 RD
UNIT 14
BONITA SPRINGS, FL 34135 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 ARCE

04/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ARCE, LUIS A
Address: 4260 GULF SHORE BLVD N
City-St-Zip: NAPLES, FL 34103

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ARCE, LUIS A
Address: 26455 OLD 41 RD UNIT # 14
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM () Change (X) Addition
Name: ARCE, HEATHER
Address: 26455 OLD 41 RD UNIT # 14
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: LUIS ARCE

MGRM

04/26/2008

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