

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103108

FILED
Apr 28, 2009
Secretary of State

Entity Name: FULL THROTTLE CUSTOMS, LLC

Current Principal Place of Business:

1476 N. GOLDENROD RD SUITE 320
ORLANDO, FL 32807

New Principal Place of Business:

1720 N. GOLDENROD RD SUITE 4
ORLANDO, FL 32807

Current Mailing Address:

1476 N. GOLDENROD RD SUITE 320
ORLANDO, FL 32807

New Mailing Address:

1720 N. GOLDENROD RD SUITE 4
ORLANDO, FL 32807

FEI Number: 74-3142320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, ANTH ONY
10918 FERNANDO ST
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

SANTIAGO, ANTH ONY
1508 OVERDALE STREET
ORLANDO, FL 32825 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: ANTHONY SANTIAGO

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: SANTIAGO, ANTHONY
Address: 10918 FERNANDO ST
City-St-Zip: ORLANDO, FL 32825 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: SANTIAGO, ANTHONY
Address: 1508 OVERDALE STREET
City-St-Zip: ORLANDO, FL 32825 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: ANTHONY SANTIAGO

P

04/28/2009

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