

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123168

Entity Name: GVM SERVICES LLC

FILED  
Jul 22, 2008  
Secretary of State

**Current Principal Place of Business:**

1112 WESTON RD.#291  
WESTON, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1112 WESTON RD.#291  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 51-0563120      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:**

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

MARTIN ACCOUNTING & TAX SERVICE  
7678 NW 186 ST  
MIAMI, FL 33015      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: CASTRO, GUSTAVO  
Address: 1001 SORRENTO DRIVE  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM      ( ) Delete  
Name: CASTRO, VIRGINIA  
Address: 1001 SORRENTO DRIVE  
City-St-Zip: WESTON, FL 33326 US

**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: VIRGINIA CASTRO

MGRM

07/22/2008

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