

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001432

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: CAPTAIN SAVE-A-SCREEN LLC

**Current Principal Place of Business:**

3958-B COCOPLUM CIRCLE  
COCONUT CREEK, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

3958-B COCOPLUM CIRCLE  
COCONUT CREEK, FL 33063

**New Mailing Address:**

FEI Number: 20-4063241      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:**

GUTIERREZ, ANTONIO  
3958-B COCOPLUM CIRCLE  
COCONUT CREEK, FL 33063      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: MGR      ( ) Delete  
Name: GUTIERREZ, ANTONIO  
Address: 3958-B COCOPLUM CIRCLE  
City-St-Zip: COCONUT CREEK, FL 33063

Title: MGR      ( ) Delete  
Name: GUTIERREZ, AURELIA  
Address: 3858-8 COCOPLUM CIR  
City-St-Zip: COCONUT CREEK, FL 33063

**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: ANTONIO GUTIERREZ      MGR      07/09/2008

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