

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017579

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** SALVATORE R. GOMES, LLC.

**Current Principal Place of Business:**

5224 WEST STATE ROAD 46 # 411  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

5224 WEST STATE ROAD 46 # 411  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: 11-3770658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOMES, SALVATORE R  
5224 WEST STATE ROAD 46 # 411  
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  
Name: GOMES, SALVATORE R  
Address: 5224 WEST STATE ROAD 46 # 411  
City-St-Zip: SANFORD, FL 32771 US

I hereby 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: SALVATORE R. GOMES

LLC

01/06/2010

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