

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017692

Entity Name: OFFICE 2 OFFICE, LLC

FILED  
Mar 16, 2009  
Secretary of State

**Current Principal Place of Business:**

3225 SOUTH MCDILL AVE. #129-151  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3225 SOUTH MCDILL AVE. #129-151  
TAMPA, FL 33629

**New Mailing Address:**

FEI Number: 20-4797149

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

F&L CORP.  
ONE INDEPENDENT DRIVE  
SUITE 1300  
JACKSONVILLE, FL 32202 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: PRES ( ) Delete  
Name: PARAS, NICHOLAS  
Address: 2203 S. CHURCH AVENUE  
City-St-Zip: TAMPA, FL 33629 US

**ADDITIONS/CHANGES:**

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: NICHOLAS PARAS

PRES

03/16/2009

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