

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030257

**FILED**  
**May 25, 2008**  
**Secretary of State**

**Entity Name:** ROSA ESCOBAR CARPET INSTALLER LLC

**Current Principal Place of Business:**

3044 PRICE AVE  
FORT MYERS, FL 33916 US

**New Principal Place of Business:**

4514 25ST. SW.  
LEE HIGH ACRES, FL 33973 US

**Current Mailing Address:**

3044 PRICE AVE  
FORT MYERS, FL 33916 US

**New Mailing Address:**

4514 25ST. SW.  
LEE HIGH ACRES, FL 33973 US

**FEI Number:** 20-4553414      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

ESCOBAR, ROSA  
3711 BALLARD RD  
FORT MYERS, FL 33916 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: MGR      ( ) Delete  
Name: ESCOBAR, ROSA  
Address: 3711 BALLARD RD  
City-St-Zip: FORT MYERS, FL 33916 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: ROSA ESCOBAR

MGR

05/25/2008

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