

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000055493

Entity Name: ABSOLUTE IDENTITY, LLC

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

13513 PRESTIGE PL., STE 101  
TAMPA, FL 33635

## **New Principal Place of Business:**

777 N. ASHLEY DRIVE  
#402  
TAMPA, FL 33602

## **Current Mailing Address:**

13513 PRESTIGE PL., STE 101  
TAMPA, FL 33635

## **New Mailing Address:**

777 N. ASHLEY DRIVE  
#402  
TAMPA, FL 33602

FEI Number: 26-4678843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VU, KIM CHI T OWNER  
13513 PRESTIGE PL., STE 101  
TAMPA, FL 33635 US

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

VU, KIM CHI T OWNER  
777 N. ASHLEY DRIVE  
#402  
TAMPA, FL 33602 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:

04/15/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: VU, KIM CHI T OWNER  
Address: 777 N ASHLEY DRIVE, #402  
City-St-Zip: TAMPA, FL 33602 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: KIM CHI VU

MGR

04/15/2011

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