

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082147

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: PLAZA SALCEDO "LLC"

**Current Principal Place of Business:**

6759 NORTH ARMENIA AVE  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

10218 GRANTCREEK DR  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 20-5292728      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:**

MENDOZA, JUNIOR J  
10218 GRANTCREEK DR  
TAMPA FL, FL 33647      US

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

MENDOZA, JUNIOR J  
10218 GRANTCREEK DR  
TAMPA, FL 33647      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:

09/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: MENDOZA, CARMEN D  
Address: 10218 GRANTCREEK DR  
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM      ( ) Delete  
Name: JOSUE J MENDOZA  
Address: 10218 GRANTCREEK DR  
City-St-Zip: TAMPA, FL 33647 US

**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: CARMEN MENDOZA

MGR

09/01/2009

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