

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090994

Entity Name: FLORIDA ETL SERVICES, LLC

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

560 SOUTHPARK ROAD, APT. 736  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

1735 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

560 SOUTHPARK ROAD, APT. 736  
HOLLYWOOD, FL 33021

**New Mailing Address:**

1735 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019

FEI Number: 20-5564450

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VILLARREAL, GUILLERMO  
560 SOUTHPARK ROAD, APT. 736  
HOLLYWOOD, FL 33021 US

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

VILLARREAL, GUILLERMO  
1735 WEEPING WILLOW WAY  
HOLLYWOOD, FL 33019 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:

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VILLARREAL, GUILLERMO  
Address: 560 SOUTHPARK ROAD, APT. 736  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VILLARREAL, GUILLERMO  
Address: 1735 WEEPING WILLOW WAY  
City-St-Zip: HOLLYWOOD, FL 33019

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: GUILLERMO VILLARREAL

MR.

04/29/2009

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