2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091739

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32824 US

5839 STRADA CAPRI WAY

ORLANDO, FL 32835

RENGIFO, EDDY

() Delete

MGR

Entity Name: INTEGRATED INVESTORS, LLC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1413 CEDAR LAKE DRIVE 1413 CEDAR LAKE DR ORLANDO, FL 32824 ORLANDO, FL 32824 **Current Mailing Address: New Mailing Address:** 1413 CEDAR LAKE DRIVE 2212 STONE LAKE CT ORLANDO, FL 32824 ORLANDO, FL 32824 FEI Number: 20-5586522 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERNANDEZ, RAUL E SR. HERNANDEZ, RAUL E SR. 11215 OLD HARBOUR RD #201 2212 STONE LAKE CT ORLANDO, FL 32824 US ORLANDO, FL 32837 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: RAUL HERNANDEZ 03/25/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete RODRIGUEZ, GEOVANNI A SR. Name: Name: Address: 2227 CHATHAM PLACE DR. Address: City-St-Zip: ORLANDO, FL 32824 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: FIGUEROA, NANCY C MRS. Name: Address: 2212 STONE LAKE CT Address: City-St-Zip: ORLANDO, FL 32824 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RIOS, JOSE V SR. Name: Name: 2239 CHATHAM PLACE DR. Address: Address:

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.

City-St-Zip:

() Change () Addition

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: NANCY FIGUEROA MGRM 03/25/2009