

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094707

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ALL IN CONSTRUCTIONS LLC

## Current Principal Place of Business:

190 LA PAZ DRIVE  
KISSIMMEE, FL 334743

## New Principal Place of Business:

661 CRESTING OAK CIRCLE  
ORLANDO, FL 32824

## Current Mailing Address:

190 LA PAZ DRIVE  
KISSIMMEE, FL 334743

## New Mailing Address:

661 CRESTING OAK CIRCLE  
ORLANDO, FL 32824

FEI Number: 20-5648115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALVAREZ, NILSON  
190 LA PAZ DRIVE  
KISSIMMEE, FL 334743 US

## Name and Address of New Registered Agent:

ALVAREZ, NILSON  
661 CRESTING OAK CIRCLE  
ORLANDO, FL 32824 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:

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ALVAREZ, NILSON  
Address: 190 LA PAZ DRIVE  
City-St-Zip: KISSIMMEE, FL 334743

Title: MGRM ( ) Delete  
Name: SANTOS, HERNANDO  
Address: 194 LA PAZ DRIVE  
City-St-Zip: KISSIMMEE, FL 334743

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ALVAREZ, NILSON  
Address: 661 CRESTING OAK CIRCLE  
City-St-Zip: ORLANDO, FL 32824

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: NILSON ALVAREZ

MGRM

04/30/2009

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