

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094814

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: ELISAMUEL INTERNATIONAL, LLC

## Current Principal Place of Business:

2908 RIVER BIRCH DR.  
KISSIMMEE, FL 34741

## New Principal Place of Business:

## Current Mailing Address:

2908 RIVER BIRCH DR.  
KISSIMMEE, FL 34741

## New Mailing Address:

FEI Number: 45-0544045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: GOMEZ, SAMUEL  
Address: 2908 RIVER BIRCH DR.  
City-St-Zip: KISSIMMEE, FL 34741

Title: MGR ( ) Delete  
Name: PINEIRO, ELISA  
Address: 2908 RIVER BIRCH DR.  
City-St-Zip: KISSIMMEE, FL 34741

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: ALBINO, ANGELO  
Address: 7631 SILVER CROWN CT.  
City-St-Zip: ORLANDO, FL 32818

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: SAMUEL GOMEZ

MGR

03/12/2009

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