## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000102934

City-St-Zip:

Entity Name: APO'S INTERIOR ELITE LLC

FILED Jun 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3600 S. STATE ROAD 7, STE. 230 3600 S. STATE ROAD 7, STE. 309 MIRAMAR, FL 33023 MIRAMAR, FL 33023 **Current Mailing Address: New Mailing Address:** 3600 S. STATE ROAD 7, STE. 230 3600 S. STATE ROAD 7, STE. 309 MIRAMAR, FL 33023 MIRAMAR, FL 33023 FEI Number: 30-0386418 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: Name and Address of New Registered Agent: FUENTES, LUZ E GONZALEZ, CARLOS 121 GOLDEN ISLE DR 3600 S STATE RD. 7 STE 309 # 204 HALLANDALE, FL 33009 US MIRAMAR, FL 33023 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: CARLOS GONZALEZ 06/09/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete GONZALEZ, CARLOS Name: Name: 315 MAYWOOD AVE Address: Address: City-St-Zip: SPRINGHILL, FL 34606 City-St-Zip: Title: MGR () Delete Title: () Change () Addition FUENTES, LUZ Name: Name: Address: 5035 SW. 29TH STREET Address: City-St-Zip: **DAVIE, FL 34606** City-St-Zip: Title: MGR () Delete Title: () Change () Addition GONZALEZ, JUAN Name: Name: Address: 121 GOLDEN ISLE DR Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: MGR () Delete Title: () Change () Addition GONZALEZ, GUALBERTO Name: Name: Address: P.O. BOX 310637 Address: MIAMI, FL 33231 City-St-Zip: City-St-Zip: Title: MGR () Delete Title: () Change () Addition GONZALEZ, WILLIAM Name: Name: 741 N 67TH AVE Address: Address: City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition GONZALEZ, ISRAEL Name: Name: Address: Address: 6721 JOHNSON ST. APT. 103

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:

HOLLYWOOD, FL 33024

SIGNATURE: LUZ E FUENTES MRG 06/09/2009