2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103342

Address:

126 SE 12 AVE

City-St-Zip: CAPE CORAL, FL 33990

Entity Name: TIFFANY LIMOUSINE OF S.W. FLORIDA LLC

FILED Apr 29, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:		
126 SE 12 CAPE COF	AVE RAL, FL 33990				
Current Mailing Address:			New Mailing Address:		
126 SE 12 CAPE COF	AVE RAL, FL 33990				
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()		Certificate of Status Desired ()
Name and	Address of Co	ırrent Registered Agent:	Name and	Address o	f New Registered Agent:
126 SE 12 CAPE COR The above	RAL, FL 33990	US ubmits this statement for the p	ourpose of changing i	its registered	d office or registered agent, or both
SIGNATUF					
Electronic Signature of Registered Age			nt Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () SOUMASTRE, C 126 SE 12 AVE CAPE CORAL, F		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () I SOUMASTRE, D 126 SE 12 AVE CAPE CORAL, F		Title: Name: Address: City-St-Zip:	MGRM SOUMASTR 126 SE 12 A CAPE CORA	·
Title: Name: Address: City-St-Zip:	MGRM () I SOUMASTRE, M 126 SE 12 AVE CAPE CORAL, F		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name:	MGRM ()	Delete	Title:		() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: CAESAR SOUMASTRE MGR 04/29/2009