

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000111386

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** CARRIAGE LIMOUSINE, LLC

**Current Principal Place of Business:**

678 BALD EAGLE DR  
4  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

2431 6TH AVENUE NE  
NAPLES, FL 34120

**Current Mailing Address:**

678 BALD EAGLE DR  
4  
MARCO ISLAND, FL 34145

**New Mailing Address:**

2431 6TH AVENUE NE  
NAPLES, FL 34120

**FEI Number:** 20-5896833

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ACCOUNTING PLUS MORE  
4100 CORPORATE SQ  
STE 150  
NAPLES, FL 34104 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: MGRM  
Name: MOTAMAD, MOSTAFA  
Address: 2431 6TH AVE NE  
City-St-Zip: NAPLES, FL 34120

Title: MGRM  
Name: MOTAMAD, FANNY B  
Address: 2431 6TH AVE NE  
City-St-Zip: NAPLES, FL 34120

I hereby 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: MOSTAFA MOTAMAD

MGRM

04/19/2012

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