

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115396

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

10295 A NW 46TH ST  
SUNRISE, FL 33351

**New Principal Place of Business:**

10295A NW 46TH ST  
SUNRISE, FL 33351

**Current Mailing Address:**

10295 A NW 46TH ST  
SUNRISE, FL 33351

**New Mailing Address:**

10295A NW 46TH ST  
SUNRISE, FL 33351

FEI Number: 20-5961309

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOMOREK, KATHY  
10295 A NW 46TH ST  
SUNRISE, FL 33351 US

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

KOMOREK, KATHY  
10295A NW 46TH ST  
SUNRISE, FL 33351 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: KATHY KOMOREK

02/15/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: KOMOREK, KATHLEEN  
Address: 10295A NW 46TH ST  
City-St-Zip: SUNRISE, FL 33351

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: KATHLEEN KOMOREK

P

02/15/2012

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