

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000004029

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Entity Name:** MAXBINE ENTERPRISES, LLC.

**Current Principal Place of Business:**

1261 S.W. SANTIAGO AVE.  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

1261 S.W. SANTIAGO AVE.  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

**FEI Number:** 22-3951906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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  
**Name:** LILITE, JEAN-MAXO  
**Address:** 1261 S.W. SANTIAGO AVE.  
**City-St-Zip:** PORT ST. LUCIE, FL 34953

**Title:** T  
**Name:** LILITE, GOLDA J SABINE  
**Address:** 1261 SW SANTIAGO AVE  
**City-St-Zip:** PORT SAINT LUCIE, FL 34953

**Title:** MGR  
**Name:** DUMERCY, JOSUE  
**Address:** 2585 SW BEVERLY ST  
**City-St-Zip:** PORT SAINT LUCIE, FL 34953

**Title:** S  
**Name:** SILENCIEUX, PRESLET  
**Address:** 184 SE BELLBROOK ST  
**City-St-Zip:** PALM BAY, FL 32909

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:** JEAN-MAXO LILITE

MGR

04/24/2010

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