

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000016724

Entity Name: NV & VD LLC.

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

7125 LAKEWORTH RD
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

7125 LAKEWORTH RD
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-8442086 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:

DUARTE, VICTOR J
4156 NW 90 AVE
207
CORAL SPRING, FL 33065 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DUARTE, VICTOR J
Address: 4156 NW 90 AVE # 207
City-St-Zip: CORAL SPRING, FL 33065

Title: MGR () Delete
Name: VELA, NESTOR
Address: 4156 NW 90 AVE #207
City-St-Zip: CORAL SPRING, FL 33065

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: VICTOR DUARTE

MGR

05/08/2009

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