

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000035339

Entity Name: ZERO POINT, LLC

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2709 W NORTH A ST.  
TAMPA, FL 33609

**New Principal Place of Business:**

2724 ANZIO CT  
307  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

2709 W NORTH A ST.  
TAMPA, FL 33609

**New Mailing Address:**

2724 ANZIO CT  
307  
PALM BEACH GARDENS, FL 33410

FEI Number: 20-8795497

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOLI, ADA M  
2709 W. NORTH A ST.  
TAMPA, FL 33609 US

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

LOLI, ADA M  
2724 ANZIO CT  
307  
PALM BEACH GARDENS, FL 33410 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: ADA LOLI

04/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LOLI, ADA M  
Address: 2724 ANZIO CT #307  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: ADA LOLI

MGR

04/26/2010

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