

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045890

FILED  
Jan 12, 2009  
Secretary of State

Entity Name: MASTER RESTORATION LLC

**Current Principal Place of Business:**

13321 FERNOW ST.  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

13321 FERNOW ST.  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 20-8928834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAVARRO, MAURICIO  
13321 FERNOW ST.  
WINDERMERE, FL 34786 US

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

PATRICIA, SANTOS  
13321 FERNOW ST.  
WINDERMERE, FL 34786 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: PATRICIA SANTOS

01/12/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NAVARRO, MAURICIO  
Address: 13321 FERNOW ST.  
City-St-Zip: WINDERMERE, FL 34786

Title: MGR ( ) Delete  
Name: SANTOS, PATRICIA A  
Address: 13321 FERNOW ST  
City-St-Zip: WINDERMERE, FL 34786

**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: PATRICIA SANTOS

MGR

01/12/2009

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