

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055437

FILED
May 06, 2008
Secretary of State

Entity Name: AVIANT PARTY RENTALS, LLC

Current Principal Place of Business:

10335 SW 130TH COURT
DUNNELLON, FL 34432 US

New Principal Place of Business:

Current Mailing Address:

10335 SW 130TH COURT
DUNNELLON, FL 34432 US

New Mailing Address:

FEI Number: 26-0230767 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:

PERALTA, ESTHER PRES.
10335 SW 130TH COURT
DUNNELLON, FL 34432 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: PERALTA, ESTHER PRES
Address: 10335 SW 130TH CT.
City-St-Zip: DUNNELLON, FL 34432

Title: VP () Change (X) Addition
Name: PERALTA, ALVARO M VP
Address: 10335 SW 130TH CT.
City-St-Zip: DUNNELLON, FL 34432

Title: COO () Change (X) Addition
Name: PERALTA, KEVIN M COO
Address: 10335 SW 130TH CT
City-St-Zip: DUNNELLON, FL 34432

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: ESTHER PERALTA

PRES

05/06/2008

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