## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055437

Name:

Address:

City-St-Zip:

Entity Name: AVIANT PARTY RENTALS, LLC

FILED May 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10335 SW 130TH COURT DUNNELLON, FL 34432 US **Current Mailing Address: New Mailing Address:** 10335 SW 130TH COURT DUNNELLON, FL 34432 US 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: Name and Address of New Registered Agent: PERALTA, ESTHER PRES. PERALTA, ESTHER L PRES 10335 SW 130TH CT 10335 SW 130TH COURT DUNNELLON, FL 34432 US DUNNELLON, FL 34432 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: ESTHER PERALTA 05/01/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: **PRES** Title: () Change () Addition () Delete PERALTA, ESTHER PRES Name: Name: Address: 10335 SW 130TH CT. Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: PERALTA, ALVARO M VP Name: Address: 10335 SW 130TH CT. Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: COO () Delete Title: () Change () Addition PERALTA, KEVIN M COO Name: Name: 10335 SW 130TH CT Address: Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: () Delete Title: MGR ( ) Change (X) Addition

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.

Name:

Address:

City-St-Zip:

PERALTA, MICHELLE L MGR

10335 SW 130TH CT

DUNNELLON, FL 34432

SIGNATURE: ESTHER PERALTA PRES 05/01/2009