

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000066429

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Entity Name:** AMMM, LLC

**Current Principal Place of Business:**

2661 S.E. HAMDEN ROAD  
PORT ST. LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

2661 S.E. HAMDEN ROAD  
PORT ST. LUCIE, FL 34952

**New Mailing Address:**

**FEI Number:** 26-0420289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRICK, WILLIAM W JR.  
1216 EAST ATLANTIC BOULEVARD  
SUITE 7  
POMPANO BEACH, FL 33060 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:** MGRM  
**Name:** MARIOTTI, MICHAEL JR.  
**Address:** 2661 S.E. HAMDEN ROAD  
**City-St-Zip:** PORT ST. LUCIE, FL 34952

**Title:** MGRM  
**Name:** MARIOTTI, ASTRID  
**Address:** 2661 S.E. HAMDEN ROAD  
**City-St-Zip:** PORT ST. LUCIE, FL 34952

**Title:** MGR  
**Name:** TRICK, WILLIAM W JR  
**Address:** 1216 EAST ATLANTIC BLVD., SUITE 7  
**City-St-Zip:** POMPANO BEACH, FL 33060

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:** MICHAEL MARIOTTI

MGRM

03/24/2011

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