

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000071484

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** PHOTOS BY MAVI LLC

**Current Principal Place of Business:**

11748 SW1ST STREET  
CORAL SPRINGS, FL 33071 US

**New Principal Place of Business:**

11748 SW 1ST STREET  
CORAL SPRINGS, FL 33071 US

**Current Mailing Address:**

11748 SW 1ST STREET  
CORAL SPRINGS, FL 33071 US

**New Mailing Address:**

**FEI Number:** 56-2669190      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FUENTES-ARCHILLA, MARIA  
11748 SW1ST STREET  
CORAL SPRINGS, FL 33071 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:** ARCHILLA, OMAR D  
**Address:** 11748 SW 1ST STREET  
**City-St-Zip:** CORAL SPRINGS, FL 33071 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: OMAR ARCHILLA

MGRM

02/07/2011

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