

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081355

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** THE TOTAL RESTORATION KING CO. LLC.

**Current Principal Place of Business:**

8202 WILES ROAD #117  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

360 NE 1ST AVENUE  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

8202 WILES ROAD #117  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 20-8006400      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:**

GONI, RACHEL  
8202 WILES ROAD #117  
CORAL SPRINGS, FL 33067      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: P      ( ) Delete  
Name: MONCADA, DANIEL III  
Address: 8202 WILES ROAD #117  
City-St-Zip: CORAL SPRINGS, FL 33067

**ADDITIONS/CHANGES:**

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: DANIEL MONCADA III

PRES

05/01/2009

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