

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000100181

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** PERFETTI DECORATING LLC

**Current Principal Place of Business:**

14724 CANAL VIEW DR  
STE C  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

14724 CANAL VIEW DR  
STE C  
DELRAY BEACH, FL 33484

**New Mailing Address:**

**FEI Number:** 59-3493782

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERFETTI, ALFONSO  
14724 CANAL VIEW DR.  
DELRAY BEACH, FL 33484 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:** MGR  
**Name:** PERFETTI, ALFONSO  
**Address:** 14724 CANAL VIEW DR STE C  
**City-St-Zip:** DELRAY BEACH, FL 33484

**Title:** MGRM  
**Name:** PERFETTI, ALFONSO III  
**Address:** 479 SW LANE HURST  
**City-St-Zip:** PORT ST. LUCIE, FL 34983

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:** ALFONSO PERFETTI

PRES

01/11/2010

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