

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102742

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: ALIEC, LLC.

**Current Principal Place of Business:**

14314 VERANO DRIVE  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

14314 VERANO DRIVE  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 26-1226231      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:**

PROFESSIONAL ACCOUNTANTS & CONSULTANTS  
2471 E. SEMORAN BLVD  
APOPKA, FL 32703      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: MGR      ( ) Delete  
Name: MORALES, OSCAR JR.  
Address: 14314 VERANO DRIVE  
City-St-Zip: ORLANDO, FL 32837

Title: MGRM      ( ) Delete  
Name: MORALES, CEILA  
Address: 4925 JETTON DRIVE  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: OSCAR MORALES

MGR

07/09/2008

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