

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000111197

FILED  
Jan 13, 2008  
Secretary of State

Entity Name: BROTHER SERVICES, LLC

**Current Principal Place of Business:**

306 W. MAIN ST  
IMMOKALEE, FL 341423931

**New Principal Place of Business:**

**Current Mailing Address:**

306 W. MAIN ST  
IMMOKALEE, FL 341423931

**New Mailing Address:**

FEI Number: 20-5462351

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ, COSME E  
160 12TH AVENUE NE  
NAPLES, FL 341203354 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 ( ) Delete  
Name: BAEZ, BOLIVAR  
Address: 117 W. JEFFERSON AVENUE  
City-St-Zip: IMMOKALEE, FL 34142

Title: MGR ( ) Delete  
Name: MENDOZA, JOSEFINA  
Address: 117 W. JEFFERSON AVENUE  
City-St-Zip: IMMOKALEE, FL 34142

**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: BOLIVAR BAEZ

MGRM

01/13/2008

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