

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114949

Entity Name: PIVAL SERVICES, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

3201 NE 183RD STREET UNIT 401
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

3201 NE 183RD STREET UNIT 401
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 26-1420081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRANSGLOBAL CORPORATE ADMINISTRATION LLC
520 BRICKELL KEY DRIVE
SUITE O-305
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

MARTHA DUARTE
2775 NE 187 STREET
SUITE 627
AVENTURA, FL 33180 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: DUARTE MARTHA, C

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ILLIDEGE, GLORIA
Address: 3201 NE 183RD STREET UNIT 401
City-St-Zip: AVENTURA, FL 33160

Title: MGR () Delete
Name: TAMAYO, CARLOS E
Address: 3201 NE 183RD STREET UNIT 401
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

Title: D (X) Change () Addition
Name: ILLIDEGE, GLORIA
Address: 3201 NE 183RD STREET UNIT 401
City-St-Zip: AVENTURA, FL 33160

Title: D (X) Change () Addition
Name: TAMAYO, CARLOS E
Address: 3201 NE 183RD STREET UNIT 401
City-St-Zip: AVENTURA, FL 33160

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: CARLOS TAMAYO

D

04/28/2009

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