## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115558

Entity Name: E.R. PHONE REPAIR CLINIC, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

700 W VINE ST SUITE 102 KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

700 W VINE ST SUITE 102 KISSIMMEE, FL 34741

FEI Number: 26-1415651 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARCIA DE QUEVEDO, FRANCHESKA
3501 W VINE ST
STE 269

GARCIA DE QUEVEDO, FRANCHESKA
700 W VINE ST
STE 102

KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 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: 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition
Name: GARCIA DE QUEVEDO, FRANCHESKA
Address: 3501 WEST VINE STREET SUITE 269 Address: 700 W VINE STREET SUITE 102

City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 RAMIREZ, FLOR
 Name:

 Address:
 2599 MC MICHAEL ROAD
 Address:

 City-St-Zip:
 ST CLOUD, FL 34771
 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: FRANCHESKA GARCIA DE QUEVEDO MGRM 04/29/2009