

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000121127

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** LIGHTWEIGHT CONCRETE SOLUTIONS, LLC

**Current Principal Place of Business:**

545 NW MERCANTILE PLACE UNIT 111  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

545 NW MERCANTILE PLACE UNIT 111  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

**FEI Number:** 26-1506946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PEREZ, VICTOR X  
5390 NW AKBAR TERRACE  
PORT ST. LUCIE, FL 34986 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  
**Name:** DE LA PAZ, PATRICIA  
**Address:** 5390 NW AKBAR TERRACE  
**City-St-Zip:** PORT ST. LUCIE, FL 34986

**Title:** MGRM  
**Name:** PEREZ, VICTOR  
**Address:** 5390 NW AKBAR TERRACE  
**City-St-Zip:** PORT ST LUCIE, FL 34986

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:** PATRICIA DE LA PAZ

MGR

04/13/2011

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