

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000000112

**FILED**  
**Mar 04, 2009**  
**Secretary of State**

**Entity Name:** ECUADOREAN ENTERPRISES, LLC

**Current Principal Place of Business:**

1519 CLOWER CREEK DRIVE  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

3626 GUILDER ST  
SARASOTA, FL 34234 US

**Current Mailing Address:**

1519 CLOWER CREEK DRIVE  
SARASOTA, FL 34231 US

**New Mailing Address:**

P.O. BOX 2  
SARASOTA, FL 34230 US

FEI Number: 30-0461913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAPICA, DANIEL J  
1519 CLOWER CREEK DRIVE  
SARASOTA, FL 34231 US

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

KAPICA, DANIEL J  
3626 GUILDER ST  
SARASOTA, FL 34234 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: \_\_\_\_\_

03/04/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KAPICA, DANIEL J  
Address: 1519 CLOWER CREEK DRIVE  
City-St-Zip: SARASOTA, FL 34231 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: KAPICA, DANIEL J  
Address: 3626 GUILDER ST  
City-St-Zip: SARASOTA, FL 34234 US

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: DANIEL J. KAPICA

MGRM

03/04/2009

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