

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000013997

**FILED**  
**Jun 24, 2010**  
**Secretary of State**

**Entity Name:** ESCOBAR BAIL BONDS, LLC

**Current Principal Place of Business:**

825 S.E. MONTEREY ROAD  
SUITE #: 4  
STUART, FL 34994 US

**New Principal Place of Business:**

1000 SOUTH MILITARY TRAIL  
SUITE: D  
WEST PALM BEACH, FL 33415 US

**Current Mailing Address:**

825 S.E. MONTEREY ROAD  
SUITE #: 4  
STUART, FL 34994 US

**New Mailing Address:**

1000 SOUTH MILITARY TRAIL  
SUITE: D  
WEST PALM BEACH, FL 33415 US

**FEI Number:** 26-1950049

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ESCOBAR, LIA  
825 S.E. MONTEREY ROAD  
SUITE #: 4  
STUART, FL 34994 US

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

ESCOBAR, LIA  
1000 SOUTH MILITARY TRAIL  
SUITE: D  
WEST PALM BEACH, FL 33415 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:

06/24/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ESCOBAR, LIA  
Address: 1000 SOUTH MILITARY TRAIL, SUITE: D  
City-St-Zip: WEST PALM BEACH, FL 33415 US

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: LIA ESCOBAR

MGR

06/24/2010

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