

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030420

FILED  
Jul 18, 2009  
Secretary of State

Entity Name: QUASIMODO, LLC

## Current Principal Place of Business:

1474-A WEST 84 STREET  
HIALEAH, FL 33014 US

## New Principal Place of Business:

## Current Mailing Address:

1474-A WEST 84 STREET  
HIALEAH, FL 33014 US

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

OSMAN, L. MICHAEL  
1474-A WEST 84 STREET  
HIALEAH, FL 33014 US

## Name and Address of New Registered Agent:

OSMAN, L. MICHAEL  
1474-A WEST 84 STREET  
HIALEAH, FL 33014 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: L. MICHAEL OSMAN

07/18/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: OSMAN, L. MICHAEL  
Address: 1474-A WEST 84 STREET  
City-St-Zip: HIALEAH, FL 33014 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: OSMAN, MICHAEL P  
Address: 442 THUNDERBIRD COURT  
City-St-Zip: NASHVILLE,, TN 37209 US

Title: MGR ( ) Change (X) Addition  
Name: OSMAN, MENE S  
Address: 442 THUNDERBIRD COURT  
City-St-Zip: NASHVILLE, TN 37209

Title: MGR ( ) Change (X) Addition  
Name: OSMAN, L. MICHAEL  
Address: 1474-A WEST 84 STREET  
City-St-Zip: HIALEAH, FL 33014

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: L. MICHAEL OSMAN

MGR

07/18/2009

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