

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000032115

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** KMSAVOIA, LLC

**Current Principal Place of Business:**

401 NE 14 AVENUE  
# 809  
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

401 NE 14 AVENUE  
# 809  
HALLANDALE, FL 33009 US

**New Mailing Address:**

**FEI Number:** 26-2311886

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHWEND, ROLAND EA  
1876 N UNIVERSITY DR.  
SUITE 200 K  
PLANTATION, FL 33322 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:** MARINI, MARIA C  
**Address:** 401 NE 14 AVE. #809  
**City-St-Zip:** HALLANDALE BEACH, FL 33009 US

**Title:** MGRM  
**Name:** SAVOIA, ANTONIO F  
**Address:** 401 NE 14 AVE. #809  
**City-St-Zip:** HALLANDALE BEACH, FL 33009 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:** MARIA CRISTINA MARINI

MGR

03/31/2010

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