2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042271

Entity Name: CERTIFIED HANDPIECE REPAIR, LLC

FILED May 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

562 MANDERLEY RUN 4044 W. LAKE MARY BLVD LAKE MARY, FL 32746

104-290

LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

562 MANDERLEY RUN 4044 W. LAKE MARY BLVD # 104-290 LAKE MARY, FL 32746

LAKE MARY, FL 32746

FEI Number: 26-2493095 FEI Number Applied For () 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: Name and Address of New Registered Agent:

VAZQUEZ, IBRAHIM VAZQUEZ, IBRAHIM 562 MANDERLEY RUN 4044 W. LAKE MARY BLVD LAKE MARY, FL 32746 US # 104-290 LAKE MARY, FL 32746 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: 05/13/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: (X) Change () Addition

VAZQUEZ, IBRAHIM VAZQUEZ, IBRAHIM Name: Name: Address: 562 MANDERLEY RUN Address: 4044 W. LAKE MARY BLVD, #104-290

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

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: IBRAHIM VAZQUEZ **MGRM** 05/13/2009