

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000056790

Entity Name: MAP UNIVERSAL, LLC

**FILED**  
**Jun 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

103 QUEENS ROAD  
FORT PIERCE, FL 34949 US

**New Principal Place of Business:**

**Current Mailing Address:**

103 QUEENS ROAD  
FORT PIERCE, FL 34949 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FARRELL, RICKEY L ESQ.  
1595 SE PORT ST. LUCIE BOULEVARD  
PORT ST. LUCIE, FL 34952 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: SIBRANI REVOCABLE TRUST  
Address: 103 QUEENS ROAD  
City-St-Zip: FORT PIERCE, FL 34949 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: SIBRANI REVOCABLE TRUST

MGRM

06/22/2010

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