

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000061824

Entity Name: SMOKIN EVENTS, LLC

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3401 W NORTH B ST  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

3401 W NORTH B ST  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 27-0636494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANTISTEBAN, VIENNA  
3401 W NORTH B ST  
TAMPA, FL 33609 US

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

FUENTE, VIENNA  
3401 W NORTH B ST  
TAMPA, FL 33609 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: VIENNA FUENTE

03/22/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FUENTE, VIENNA  
Address: 3401 W NORTH B ST  
City-St-Zip: TAMPA, FL 33609

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: VIENNA FUENTE

MGR

03/22/2011

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