2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062505

Entity Name: NEGOTIATOR 4 U, LLC

City-St-Zip:

CHANDLER, AZ 85226

FILED Aug 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: % RAMON E MOSER RAMON E MOSER 935 SHRIVER CIR 935 SHRIVER CIR LAKE MARY, FL 32746 LAKE MARY, FL 32746 **Current Mailing Address: New Mailing Address:** % RAMON E MOSER RAMON E MOSER 935 SHRIVER CIR 935 SHRIVER CIR LAKE MARY, FL 32746 LAKE MARY, FL 32746 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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: MOSER, RAMON E 935 SHŔIVER CIR 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition MOSER, RAMON Name: Name: Address: 935 SHRIVER CIR Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MOSER, GUSTAVO E Name: Address: 3800 W CHANDLER BLVD - # 1139 Address:

City-St-Zip:

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: GUSTAVO MOSER MGRM 08/04/2009