

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065933

FILED
Apr 29, 2009
Secretary of State

Entity Name: ANZ REMODELING & SERVICES, LLC

Current Principal Place of Business:

5578 METROWEST BLVD
APT 112
ORLANDO, FL 32811

New Principal Place of Business:

3343 SOUTH KIRKMAN RD
APT 739
ORLANDO, FL 32811 US

Current Mailing Address:

5578 METROWEST BLVD
APT 112
ORLANDO, FL 32811

New Mailing Address:

3343 SOUTH KIRKMAN RD
APT 739
ORLANDO, FL 32811 US

FEI Number: 42-1763004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON ACCOUNTING & CONSULTING SERV LLC
8818 COMMODITY CIR
STE 40
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LARSON ACCOUNTING & CONSULTING SERV LLC
8810 COMMODITY CIR
STE 17
ORLANDO, FL 32819 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: CAROLINE LARSON

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CLAUDIR, ANZILIERO
Address: 5578 METROWEST BLVD APT 112
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ANZILIERO, CLAUDIR
Address: 3343 SOUTH KIRKMAN RD APT 739
City-St-Zip: ORLANDO, FL 32811 US

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: CLAUDIR ANZILIERO

MGR

04/29/2009

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