

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068291

Entity Name: CHAVEZ AFFILIATES LLC

FILED  
Jan 10, 2012  
Secretary of State

**Current Principal Place of Business:**

5737 KINGFISH DR.  
APT. C  
LUTZ, FL 33558

**New Principal Place of Business:**

3812 MISTY WILLOW WAY  
LUTZ, FL 33558

**Current Mailing Address:**

5737 KINGFISH DR.  
APT. C  
LUTZ, FL 33558

**New Mailing Address:**

3812 MISTY WILLOW WAY  
LUTZ, FL 33558

FEI Number: 26-2941292

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAVEZ, JOEL  
5737 KINGFISH DR.  
APT. C  
LUTZ, FL 33558 US

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

CHAVEZ, JOEL  
4929 TOWN N COUNTRY BLVD  
TAMPA, FL 33615 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:

01/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHAVEZ, JOEL  
Address: 4929 TOWN N COUNTRY BLVD  
City-St-Zip: TAMPA, FL 33615

Title: MS  
Name: RAMADAN, DINA  
Address: 3812 MISTY WILLOW WAY  
City-St-Zip: LUTZ, FL 33558

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: JOEL CHAVEZ

MGRM

01/10/2012

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