

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000070866

FILED  
Mar 29, 2009  
Secretary of State

Entity Name: MABENEL TAX & MULTISERVICES, LLC

## Current Principal Place of Business:

407 SOUTH DIXIE HWAY SUITE 200  
LAKE WORTH, FL 33460 US

## New Principal Place of Business:

407 SOUTH DIXIE HWAY  
200  
LAKE WORTH, FL 33460 US

## Current Mailing Address:

P.O. BOX 2067  
MCDONOUGH, GA 30253 US

## New Mailing Address:

FEI Number: 26-3039219      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOTO, AMPARO  
4096 GARDENIA AVENUE  
LAKE WORTH, FL 33461 US

## Name and Address of New Registered Agent:

DUCHATELIER, MARLENE  
1215 SEA PINES WAY  
LANTANA, FL 33462 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: MARLENE DUCHATELIER

03/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SOTO, AMPRO  
Address: 4096 GARDENIA AVENUE  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: MGRM ( ) Delete  
Name: CHARLES, NESLY ISMENARD  
Address: P.O. BOX 2067  
City-St-Zip: MCDONOUGH, GA 30253 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: CHARLES, NESLY I  
Address: 1215 SEA PINES WAY  
City-St-Zip: LANTANA, FL 33462 US

Title: MGRM (X) Change ( ) Addition  
Name: JULES, JUGINS  
Address: 407 SOUTH DIXIE HWY SUITE 200  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: AMGR ( ) Change (X) Addition  
Name: AMPARO, SOTO  
Address: 4096 GARDENIA AVENUE  
City-St-Zip: LAKE WORTH, FL 33461

Title: AMGR ( ) Change (X) Addition  
Name: PETIT-FRERE, JUDE  
Address: 5861 AURORA COURT  
City-St-Zip: LAKE WORTH, FL 33463

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: NESLY ISMENRD CHARLES

OWNER

03/29/2009

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