

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000084730

**FILED**  
**Nov 11, 2011**  
**Secretary of State**

**Entity Name:** ACCOUNTING BY GLORIA LTD. LIABILITY CO.

**Current Principal Place of Business:**

6278 NORTH FEDERAL HWY  
230  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

6278 NORTH FEDERAL HWY  
230  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 26-3292807

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COSTANTINO, GLORIA  
3200 PORT ROYALE DR. N.  
#202  
FORT LAUDERDALE, FL 33308 US

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

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:**

Title: MGRM  
Name: COSTANTINO, GLORIA  
Address: 3200 PORT ROYALE DR. #202  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM  
Name: PERSICHILLI, VIRGINIA A  
Address: 2577 NE 15 STREET  
City-St-Zip: POMPANO BEACH, FL 33062

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: GLORIA COSTANTINO

MGRM

11/11/2011

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