

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000088983

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** ADMIRAL TOURS PLUS LLC

**Current Principal Place of Business:**

9226 TECKY CYPRESS  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

9226 TECKY CYPRESS  
ORLANDO, FL 32836

**New Mailing Address:**

888 BISCAYN BLV  
1809  
MIAMI, FL 33132

**FEI Number:** 26-3468817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIOREDA, PABLO  
17145 NORTH BAY ROAD  
SUNNY ISLES B, FL 33160 US

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

ALHIDMI, ZIAD  
888 BISCAYN BLV  
1809  
MIAMI, FL 33132 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: ZIAD ALHIDMI

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR.  
Name: ALHIDMI, ZUHAIR  
Address: 888 BISCAYN BLV #1809  
City-St-Zip: MIAMI, FL 33132

Title: MGR  
Name: LIOREDA, PABLO  
Address: 3301 N E 1 AVE #M606  
City-St-Zip: MIAMI, FL 33137

Title: MGR  
Name: ALHIDMI, ZUHAIR  
Address: 888 BISCAYN BLV #1809  
City-St-Zip: MIAMI, FL 33132

Title: MGRM  
Name: ALHIDMI, ZIAD  
Address: 888 BISCAYN BLV #1809  
City-St-Zip: MIAMI, FL 33132

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: ZIAD ALHIDMI

MGRM

01/04/2012

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