

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000091601

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** TRI PEAK ATHLETE, LLC

**Current Principal Place of Business:**

633 DELANEY AVE  
UNIT 28  
ORLANDO, FL 32801

**New Principal Place of Business:**

617 VIRGINIA DR.  
ORLANDO, FL 32803

**Current Mailing Address:**

633 DELANEY AVE  
UNIT 28  
ORLANDO, FL 32801

**New Mailing Address:**

617 VIRGINIA DR  
ORLANDO, FL 32803

**FEI Number:** 26-3448416

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ BUSINESS LAW  
425 WEST COLINAL DR  
SUITE 101  
ORLANDO, FL 32804 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: PS  
Name: TORRES, HECTOR L  
Address: 617 VIRGINIA DR.  
City-St-Zip: ORLANDO, FL 32803

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: HECTOR L TORRES

PR

04/08/2011

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