

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000093522

Entity Name: LCI LIMO SERVICES, LLC

FILED  
Jul 29, 2009  
Secretary of State

**Current Principal Place of Business:**

100 N. BISCAYNE BLVD., SUITE 500  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

100 N. BISCAYNE BLVD., SUITE 500  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 26-3480599

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEVINE GOODMAN RASCO & WELLS, P.A.  
ATTN: GUY RASCO  
777 BRICKELL AVE., SUITE 850  
MIAMI, FL 33131 US

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

SALGADO, CAROLINA  
3785 NW 82 AVE  
SUITE 403  
MIAMI, FL 33166 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: CAROLINA SALGADO

07/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MRS ( ) Change (X) Addition  
Name: SALGADO, CAROLINA  
Address: 3785 NW 82 AVE, SUITE 403  
City-St-Zip: MIAMI, FL 33166

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: CAROLINA SALGADO

MGR

07/29/2009

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