

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000098092

Entity Name: CDS FRANCHISE, LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1200 BRICKELL BAY DRIVE  
SUITE 106  
CORAL GABLES, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1200 BRICKELL BAY DRIVE  
SUITE 106  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 26-4639392

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMAS G. SHERMAN, P.A.  
90 ALMERIA AVE.  
CORAL GABLES, FL 33134 US

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

MARKO, DAVID E  
3001 SW 3RD AVENUE  
MIAMI, FL 33129 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: DAVID E. MARKO

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TRIPLE PLAY FEC, LLC  
Address: 1200 BRICKELL BAY DRIVE, #106  
City-St-Zip: MIAMI, FL 33131

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: JOSE L. BUENO

MGR

04/28/2011

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