

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000102114

Entity Name: CRISMA ENTERPRISES LLC

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

8421 SOUTH ORANGE BLOSSOM TRAIL
SUITE 203
ORLANDO, FL 32809

New Principal Place of Business:

7031 GRAND NATIONAL DRIVE
SUITE 104
ORLANDO, FL 32819

Current Mailing Address:

PO BOX 771053
ORLANDO, FL 32877

New Mailing Address:

FEI Number: 26-3634400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, MARCIO L
8421 SOUTH ORANGE BLOSSOM TRAIL
SUITE 203
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

SILVA, MARCIO L
2205 MOUNTLEIGH TRAIL
ORLANDO, FL 32824 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: MARCIO SILVA

03/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SILVA, MARCIO L
Address: 8421 SOUTH ORANGE BLOSSOM TRAIL SUITE 203
City-St-Zip: ORLANDO, FL 32809

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SILVA, MARCIO L
Address: 2205 MOUNTLEIGH TRAIL
City-St-Zip: ORLANDO, FL 32824

Title: MGR () Change (X) Addition
Name: SILVA, CRISTINA
Address: 2205 MOUNTLEIGH TRAIL
City-St-Zip: ORLANDO, FL 32824

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: MARCIO SILVA

MGR

03/11/2009

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