

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000016690

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** TAB, TAX & BOOKKEEPING SERVICES LLC

**Current Principal Place of Business:**

2 SEMINOLE STREET  
SORRENTO, FL 32776

**New Principal Place of Business:**

14353 FREDRICKSBURG DR.  
ORLANDO, FL 32837

**Current Mailing Address:**

2 SEMINOLE STREET  
SORRENTO, FL 32776

**New Mailing Address:**

14353 FREDRICKSBURG DR.  
ORLANDO, FL 32837

**FEI Number:** 26-4346308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

POLANCO, LUZ  
14353 FREDRICKSBURG DR.  
ORLANDO, FL 32837 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: LUZ POLANCO

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: POLANCO, LUZ  
Address: 14353 FREDRICKSBURG DR.  
City-St-Zip: ORLANDO, FL 32837

Title: S  
Name: CARDENAS, ANNELIESE  
Address: 14353 FREDRICKSBURG DR.  
City-St-Zip: ORLANDO, FL 32837

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: LUZ POLANCO

MGR

04/30/2010

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