

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000018728

Entity Name: NUCARIB LLC

**FILED**  
**May 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2191 ALCLOBE CIRCLE  
OCOEE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

2191 ALCLOBE CIRCLE  
OCOEE, FL 34761

**New Mailing Address:**

FEI Number: 26-4302897      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WEBB, BRUCE  
1677 CAMBRIDGE VILLAGE COURT  
OCOEE, FL 34761      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: LEWIS, HORACE  
Address: 2191 ALCLOBE CIRCLE  
City-St-Zip: OCOEE, FL 34761

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: HORACE LEWIS

P

05/01/2010

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