

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000050653

Entity Name: MONDO CABINETS, LLC

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1919 DANA DRIVE  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 61633  
FT. MYERS, FL 33906

**New Mailing Address:**

FEI Number: 65-0801410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DARABAN, SHIRLEY C  
1919 DANA DRIVE  
FT. MYERS, FL 33906 US

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

DARABAN, OCTAVIAN M  
1919 DANA DRIVE  
FT. MYERS, FL 33907 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: OCTAVIAN M. DARABAN

04/12/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DARABAN, OCTAVIAN M  
Address: 1919 DANA DRIVE  
City-St-Zip: FT. MYERS, FL 33907

Title: MGR  
Name: DARABAN, SHIRLEY C  
Address: 1919 DANA DRIVE  
City-St-Zip: FT. MYERS, FL 33907

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: OCTAVIAN M. DARABAN

MR.

04/12/2011

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