

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000065474

**Entity Name:** AAA TAXI CABS L.L.C

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2106 SE GRAND DR.  
PORT ST.LUIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**  
2106 SE GRAND DR.  
PORT ST.LUCIE, FL 34952 US

**New Mailing Address:**

**FEI Number:** 27-0814159      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HARRIS, JOY M  
2106 GRAND DR.  
PORT ST.LUCIE, FL 34952 US

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

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: MGRM  
Name: HARRIS, JOY M  
Address: 2106 SE GRAND DR.  
City-St-Zip: PORT ST.LUIE, FL 34952 US

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: JOY HARRIS

MGRM

02/24/2011

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