

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000073262

Entity Name: N.A.R. SERVICES, LLC

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

**Current Principal Place of Business:**

549 N MISSION ROAD  
B  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

549 N MISSION ROAD  
B  
ORLANDO, FL 32808

**New Mailing Address:**

FEI Number: 27-0658388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENJAMIN, WILSON  
2155 AMERICANA BLVD  
ORLANDO, FL 32839 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: MGR  
Name: GRAU, ADELE  
Address: 549 N MISSION RD., #B  
City-St-Zip: ORLANDO, FL 32808

Title: MGRM  
Name: MENDOZA, NOEL  
Address: 549 N MISSION RD., #B  
City-St-Zip: ORLANDO, FL 32808

Title: MGRM  
Name: MENDOZA, NOEL JR.  
Address: 549 N MISSION RD., #B  
City-St-Zip: ORLANDO, FL 32808

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: NOEL MENDOZA

MGRG

04/30/2010

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