

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000090954

Entity Name: VIVA VIDI, LLC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

10460 ROOSEVELT BLVD.  
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

10460 ROOSEVELT BLVD.  
ST. PETERSBURG, FL 33716 UN

**Current Mailing Address:**

10460 ROOSEVELT BLVD.  
ST. PETERSBURG, FL 33716

**New Mailing Address:**

10460 ROOSEVELT BLVD.  
ST. PETERSBURG, FL 33716 UN

FEI Number: 27-2401467

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAUERS, AMY C PH.D.  
879 ADDISON DR.  
ST. PETERSBURG, FL 33716 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: SAUERS, AMY C  
Address: 879 ADDISON DR.  
City-St-Zip: ST. PETERSBURG, FL 33716 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: AMY SAUERS

MGR

04/24/2012

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