

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000107473

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** OLIVERA CONSULTING GROUP L.L.C.

**Current Principal Place of Business:**

6840 TOWN HARBOUR BLVD.  
#3411  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

6840 TOWN HARBOUR BLVD.  
#3411  
BOCA RATON, FL 33433

**New Mailing Address:**

PO BOX 880352  
BOCA RATON, FL 33488

**FEI Number:** 27-1263078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLIVERA, MICHELLE  
6840 TOWN HARBOUR BLVD.  
#3411  
BOCA RATON, FL 33433 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:** MISS  
**Name:** OLIVERA, MICHELLE  
**Address:** 6840 TOWN HARBOUR BLVD. #3411  
**City-St-Zip:** BOCA RATON, FL 33433

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:** MICHELLE OLIVERA

MISS

04/19/2010

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