

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000112100

FILED  
Apr 27, 2010  
Secretary of State

Entity Name: PLAZA MULTI SERVICE, LLC

**Current Principal Place of Business:**

2720 W WATERS AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

2720 W WATERS AVE  
TAMPA, FL 33614

**New Mailing Address:**

FEI Number: 27-1349305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COLLADO, NICOLAS A  
8955 IRON OAK AVE  
TAMPA, FL 33647 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: PRES  
Name: URIBE, RAFAEL E  
Address: 10204 GRANT CREEK DR  
City-St-Zip: TAMPA, FL 33647

Title: VP  
Name: COLLADO, NICOLAS A  
Address: 8955 IRON OAK AVE  
City-St-Zip: TAMPA, FL 33647

Title: T  
Name: DE COLLADO, MARIA M  
Address: 8955 IRON OAK AVE  
City-St-Zip: TAMPA, FL 33647

Title: S  
Name: URIBE, NANCY R  
Address: 9304 LEATHERWOOD AVE  
City-St-Zip: TAMPA, FL 33647

Title: C  
Name: COLLADO, EBEN EZER N  
Address: 8955 IRON OAK AVE  
City-St-Zip: TAMPA, FL 33647

Title: C  
Name: URIBE, RAFAEL E JR  
Address: 10204 GRANT CREEK DR  
City-St-Zip: TAMPA, FL 33647

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: RAFAEL URIBE

PRES

04/27/2010

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