

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000116087

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** GI EXPRESS, LLC

**Current Principal Place of Business:**

319 SW FIG AVENUE  
PORT SAINT LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

319 SW FIG AVENUE  
PORT SAINT LUCIE, FL 34953

**New Mailing Address:**

265 SW PORT SAINT LUCIE BLV  
PMB235  
PORT SAINT LUCIE, FL 34984

**FEI Number:** 01-0937485

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GARATEIX, EDUARDO  
319 SW FIG AVENUE  
PORT SAINT LUCIE, FL 34953 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:** GARATEIX, EDUARDO  
**Address:** 319 SW FIG AVENUE  
**City-St-Zip:** PORT SAINT LUCIE, FL 34953

**Title:** MGR  
**Name:** IPARRAGUIRRA, MAYRA  
**Address:** 319 SW FIG AVENUE  
**City-St-Zip:** PORT SAINT LUCIE, FL 34953

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:** EDUARDO GARATEIX

MGR

01/04/2011

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