

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000007403

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** TOTAL INVESTMENTS PLUS, LLC

**Current Principal Place of Business:**

6574 N STATE RD 7  
346  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

6574 N STATE RD 7  
346  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 27-1727254

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTINEZ, JOCELYN  
6574 N STATE RD 7  
346  
COCONUT CREEK, FL 33073 US

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

MARTINEZ, JOCELYN  
5132 NW 74TH CT.  
COCONUT CREEK, FL 33073 US

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:** JOCELYN MARTINEZ

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** MARTINEZ, JOCELYN  
**Address:** 5132 NW 74TH CT.  
**City-St-Zip:** COCONUT CREEK, FL 33073

**Title:** MGRM  
**Name:** MEDINA, CARMEN  
**Address:** C10 FIRST STREET, FOREST HILLS  
**City-St-Zip:** BAYAMON, PR 00959

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:** JOCELYN MARTINEZ

MGR

04/19/2011

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