

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000009779

FILED
Apr 30, 2012
Secretary of State

Entity Name: MALAQUIAS CONCIERGE SERVICES, LLC

Current Principal Place of Business:

3956 TOWN CENTER BLVD., #506
ORLANDO, FL 32837

New Principal Place of Business:

3200 AMACA CIR.
ORLANDO, FL 32837

Current Mailing Address:

3956 TOWN CENTER BLVD., #506
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 27-1731952 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHANDLER, ROBERTO M
3956 TOWN CENTER BLVD., #506
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

CHANDLER, ROBERTO M
3200 AMACA CIR.
ORLANDO, FL 32837 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: _____

Electronic Signature of Registered Agent

04/30/2012

Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR
Name: CHANDLER, ANGELA M
Address: 3200 AMACA CIR
City-St-Zip: ORLANDO, FL 32837

Title: CEOP
Name: CHANDLER, ANGELA M
Address: 3200 AMACA CIR.
City-St-Zip: ORLANDO, FL 32837

Title: MGRM
Name: MALAQUIAS FILHO, DANIEL
Address: 3200 AMACA CIR.
City-St-Zip: ORLANDO, FL 32837

Title: VP
Name: MALAQUIAS FILHO, DANIEL
Address: 3200 AMACA CIR.
City-St-Zip: ORLANDO, FL 32837

Title: MGRM
Name: CHANDLER, ROBERTO M
Address: 3200 AMACA CIR.
City-St-Zip: ORLANDO, FL 32837

Title: S
Name: CHANDLER, ROBERTO M
Address: 3200 AMACA CIR.
City-St-Zip: ORLANDO, FL 32837

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: ROBERTO CHANDLER

S

04/30/2012

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