

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000010196

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** FAST FIX SLIDING DOOR REPAIR LLC

**Current Principal Place of Business:**

5151 SE MARINER GARDEN CIRCLE  
STUART, FL 34997

**New Principal Place of Business:**

6641 SE WOODMILL POND LANE  
STUART, FL 34997

**Current Mailing Address:**

5151 SE MARINER GARDEN CIRCLE  
STUART, FL 34997

**New Mailing Address:**

6641 SE WOODMILL POND LANE  
STUART, FL 34997

**FEI Number:** 27-1782932

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POPI, MITCHELL I  
5151 SE MARINER GARDEN CIRCLE  
STUART, FL 34997 US

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

POPI, MITCHELL I  
6641 SE WOODMILL POND LANE  
STUART, FL 34997 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: MITCHEL I. POPI

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: POPI, MITCHELL I  
Address: 6641 SE WOODMILL POND LANE  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: POPI, HEATHER A  
Address: 6641 SE WOODMILL POND LANE  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: MASCALI, ROGER M  
Address: 738 GEISKY CREEK ROAD  
City-St-Zip: HAVESVILLE, NC 28904

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: ROGER M. MASCALI

MR.

01/04/2012

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