

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000011683

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** TWO COUSIN'S AUTO BODY, LLC

**Current Principal Place of Business:**

12241 NW 30TH MANNOR  
SUNRISE, FL 33323

**New Principal Place of Business:**

4917 N UNIVERSITY DR  
BAY 9  
SUNRISE, FL 33351

**Current Mailing Address:**

12241 NW 30TH MANNOR  
SUNRISE, FL 33323

**New Mailing Address:**

4917 N UNIVERSITY DR  
BAY 9  
SUNRISE, FL 33351

**FEI Number:** 27-1831989

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

SARACENO, MICHAEL D MGRM  
4917 N UNIVERSITY DR  
BAY 9  
SUNRISE, FL 33351 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: MICHAEL SARACENO

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: RODRIGUEZ, RICHARD  
Address: 12241 NW 30TH MANNOR  
City-St-Zip: SUNRISE, FL 33323

Title: MGRM  
Name: SARACENO, MICHAEL  
Address: 11520 NW 30TH PLACE  
City-St-Zip: SUNRISE, FL 33323

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: MICHAEL SARACENO

MGRM

04/26/2011

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