

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000020882

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** DOGGIE'S GROOM MOBILE, LLC

**Current Principal Place of Business:**

12100 NE 16TH AVE, SUITE #106  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

844 NE 121 ST  
UNIT W  
BISCAYNE PARK, FL 33161

**New Mailing Address:**

**FEI Number:** 27-2057387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAQUER, BEATRIZ  
844 NE 121 STREET  
UNIT W  
BISCAYNE PARK, FL 33161 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:** VAQUER, BEATRIZ  
**Address:** 844 NE 121ST STREET, UNIT W.  
**City-St-Zip:** BISCAYNE PARK, FL 33161

**Title:** MGR  
**Name:** LEKANNE, MARILOU  
**Address:** 844 NE 121ST STREET, UNIT W.  
**City-St-Zip:** BISCAYNE PARK, FL 33161

**Title:** S  
**Name:** VAQUER, BEATRIZ  
**Address:** 844 NE 121ST STREET, UNIT W.  
**City-St-Zip:** BISCAYNE PARK, FL 33161

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:** BEATRIZ VAQUER

MGR

04/12/2012

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