

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000025853

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** THE LEWIS SMP FAMILY GROUP, L.L.C.,

**Current Principal Place of Business:**

3900 NW 76TH AVE  
210  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

3900 NW 76TH AVE  
210  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 27-2038458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AAA CONSULTING GROUP, LLC  
2269 S. UNIVERSITY DRIVE  
390  
DAVIE, FL 33324 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:** MGRM  
**Name:** AAA CONSULTING GROUP, LLC  
**Address:** 2269 S. UNIVERSITY DRIVE 390  
**City-St-Zip:** DAVIE, FL 33324

**Title:** MGRM  
**Name:** LEWIS, SOPHIA A  
**Address:** 3900 NW 76TH AVE, 210  
**City-St-Zip:** SUNRISE, FL 33351

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:** SOPHIA LEWIS

MGRM

05/01/2012

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