

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000100043

Entity Name: A SQUARED MGMT, LLC

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6245 NW 42ND WAY  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

6245 NW 42ND WAY  
BOCA RATON, FL 33496

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

REIZBURG, ANNETTE  
6245 NW 42ND WAY  
BOCA RATON, FL 33496 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: REIZBURG, ANNETTE  
Address: 6245 NW 42ND WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM  
Name: CARRASCO, ANGELA  
Address: 10757 CLEARY BLVD., APT. 212  
City-St-Zip: PLANTATION, FL 33324

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: ANNETTE REIZBURG

MGR

05/01/2011

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