

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000103286

Entity Name: MAZED HOLDINGS LLC

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5110 W PLATT ST  
TAMPA, FL 33609

**New Principal Place of Business:**

**Current Mailing Address:**

5110 W PLATT ST  
TAMPA, FL 33609

**New Mailing Address:**

FEI Number: 27-3627347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARRUDA, MICHAEL  
2201 W SWANN AVE  
TAMPA, FL 33606 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: ARRUDA, MICHAEL  
Address: 2201 W SWANN AVE  
City-St-Zip: TAMPA, FL 33606

Title: MGRM  
Name: ESTEPHAN, ZIAD  
Address: 5005 W CLEVELAND ST  
City-St-Zip: TAMPA, FL 33609

Title: MGRM  
Name: STEPHAN, ROGER  
Address: 12003 EVANSHIRE CT  
City-St-Zip: TAMPA, FL 33626

Title: MGRM  
Name: SULTANEM, EMAD M  
Address: 5110 W PLATT ST  
City-St-Zip: TAMPA, FL 33609

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 ARRUDA

AGEN

04/09/2012

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