

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000103433

Entity Name: ALL 4 VOWELS, LLC

FILED  
Mar 11, 2011  
Secretary of State

**Current Principal Place of Business:**

4611 S. UNIVERSITY DRIVE  
#411  
DAVIE, FL 33328

**New Principal Place of Business:**

4611 S. UNIVERSITY DRIVE  
#138  
DAVIE, FL 33328

**Current Mailing Address:**

4611 S. UNIVERSITY DRIVE  
#138  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 27-3595992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EINHORN, ROBERT M  
100 S. E. 2ND STREET  
27TH FLOOR  
MIAMI, FL 33131 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: IOIA, MICHAEL P  
Address: 4611 S. UNIVERSITY DRIVE, #138  
City-St-Zip: DAVIE, FL 33328

Title: MGR  
Name: LOPEZ, DAVID  
Address: 4380 OAKES ROAD, SUITE 814  
City-St-Zip: DAVIE, FL 33314

Title: MGR  
Name: PARKER, MICHAEL  
Address: 4380 OAKES ROAD, SUITE 814  
City-St-Zip: DAVIE, FL 33314

Title: MGR  
Name: IOIA, JOSEPH  
Address: 4380 OAKES ROAD, SUITE 800  
City-St-Zip: DAVIE, FL 33314

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: DAVID LOPEZ

MGR

03/11/2011

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