

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000103721

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** OBIN'S TAX SERVICES,LLC

**Current Principal Place of Business:**

6512 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

6512 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33024

**New Mailing Address:**

**FEI Number:** 27-3609450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OBIN, LEONARD R OWNER  
16950 NORTH BAY ROAD DRIVE  
BLDG 2, APT 2417  
SUNNY ISLES, FL 33160 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:** JEAN-FRANCOIS, MARIE J  
**Address:** 4811 SW 41 STREET APT 105  
**City-St-Zip:** HOLLYWOOD, FL 33023 US

**Title:** MGR  
**Name:** OBIN, WOLF  
**Address:** 16950 NORTH BAY ROAD DRIVE  
**City-St-Zip:** SUNNY ISLES, FL 33160 US

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:** LEONARD OBIN

CEO

04/18/2011

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