

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000127854

Entity Name: GECKO DENT REPAIR LLC

FILED
Jan 04, 2012
Secretary of State

Current Principal Place of Business:

503 N GOMEZ AVE
TAMPA, FL 33609 US

New Principal Place of Business:

1615 E 5TH AVENUE
4
TAMPA, FL 33605 US

Current Mailing Address:

503 N GOMEZ AVE
TAMPA, FL 33609 US

New Mailing Address:

1615 E 5TH AVENUE
4
TAMPA, FL 33605 US

FEI Number: 27-4274296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

O'KANE, JOHN P MR.
503 N GOMEZ AVE
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

O'KANE, JOHN P MR.
1615 E 5TH AVENUE
4
TAMPA, FL 33605 US

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: JOHN P O'KANE

01/04/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: O'KANE, JOHN P MR.
Address: 1615 E 5TH AVENUE #4
City-St-Zip: TAMPA, FL 33605 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: JOHN P O'KANE

MGR

01/04/2012

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