

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000011252

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN MULTI SERVICES, LLC

**Current Principal Place of Business:**

18495 S. DIXIE HWY. #309  
MIAMI, FL 331576817

**New Principal Place of Business:**

**Current Mailing Address:**

18495 S. DIXIE HWY. #309  
MIAMI, FL 331576817

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACOSTA SANCHEZ, CESAR  
18495 S. DIXIE HWY. #309  
MIAMI, FL 331576817 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: PVST  
Name: ACOSTA, CESAR  
Address: 18495 S.DIXIE HWY #309  
City-St-Zip: MIAMI, FL 33157

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: CESAR ACOSTA

PVST

05/01/2012

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