

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000127697

Entity Name: JUST ASK ELAINE, L.L.C.

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

301 W. PLATT ST. #60  
TAMPA, FL 33606

**New Principal Place of Business:**

311 COMO STREET  
109  
TAMPA, FL 33606

**Current Mailing Address:**

301 W. PLATT ST. #60  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

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

ADAMS, ELAINE  
311 COMO ST. #109  
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: MGR  
Name: ADAMS, ELAINE  
Address: 311 COMO ST. #109  
City-St-Zip: TAMPA, FL 33606

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: ELAINE ADAMS

MGR

03/20/2012

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