

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000133257

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** ZOMBIE ICE, LLC

**Current Principal Place of Business:**

4313 REFLECTIONS BLVD  
202  
SUNRISE, FL 33325 UN

**New Principal Place of Business:**

**Current Mailing Address:**

1476 CORONADO RD  
WESTON, FL 33327 UN

**New Mailing Address:**

**FEI Number:** 45-3861862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIERRO, CARLOS  
1476 CORONADO RD  
WESTON, FL 33327 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: FIERRO, CARLOS  
Address: 1476 CORONADO RD  
City-St-Zip: WESTON, FL 33327 UN

Title: MGR  
Name: PLACE, JOHN  
Address: 4313 REFLECTIONS BLVD #202  
City-St-Zip: SUNRISE, FL 33325 UN

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: CARLOS FIERRO

MGR

04/13/2012

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