


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 30, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L99000008744**


1. Entity Name  
**CERTIFIED RECORDS MANAGEMENT, L.L.C.**



Principal Place of Business  
**4300 E. 7TH AVE.  
 TAMPA, FL 33605**

Mailing Address  
**P.O. BOX 76155  
 TAMPA, FL 33675**

**DO NOT WRITE IN THIS SPACE**



01152007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>59-3611278</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CISNEROS, FRANK G  
 4300 E. 7TH AVENUE  
 TAMPA, FL 33605**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM CISNEROS, FRANK G 4918 LYFORD CAY RD. TAMPA, FL 33629</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM SIERRA, PAUL J 7208 SPRING VALLEY DRIVE TAMPA, FL 33615</b>
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 04/06/07-80007-005 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**       **3/26/07**      **813-2471944**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #