

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000590

Entity Name: G.L. ZWERLING, LLC

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

17885 COLLINS AVE APRTMENT 4203  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

17885 COLLINS AVE APARTMENT 4203  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

2221 NE 164TH STREET  
SUITE 1107  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 52-2009619      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ZWERLING, GARY L  
2221 NE 164TH ST STE 1107  
SUITE 1107  
NORTH MIAMI BEACH, FL 33160 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: MGRM  
Name: ZWERLING, GARY L  
Address: 2221 NE 164TH ST STE 1107  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: MGRM  
Name: ZWERLING, MARIEROSE  
Address: 2221 NE 164TH ST STE 1107  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: GARY L ZWERLING      MGRM      01/08/2012

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