

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009786

FILED
May 04, 2007
Secretary of State

Entity Name: COSTADELSOL ENTERPRISES, LLC

Current Principal Place of Business:

7500 W 18TH LANE
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

7500 W 18TH LANE
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 65-1118359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FIGUEROA, GUSTAVO
7500 W 18TH LANE
HIALEAH, FL 33014 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 () Delete
Name: FIGUEROA, GUSTAVO M
Address: 7500 W 18TH LANE
City-St-Zip: HIALEAH, FL 33014

Title: MGR () Delete
Name: OLANO DE FIGUERA, NIDIA A
Address: 7500 W 18TH LANE
City-St-Zip: HIALEAH, FL 33014

Title: MGR () Delete
Name: FIGUEROA, JOSE A
Address: 7500 W 18TH LANE
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: GUSTAVO FIGUEROA

MGR

05/04/2007

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