

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020263

Entity Name: VILAR & MONTERO, P.L.

FILED  
Apr 25, 2005  
Secretary of State

**Current Principal Place of Business:**

1101 BRICKELL AVE., STE. 804  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1101 BRICKELL AVE., STE. 804  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-1152540

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONTERO, JULIAN  
335 S.W. 18 ROAD  
MIAMI, FL 33129 US

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

MONTERO, JULIAN  
526 N.E. 103 STREET  
MIAMI SHORES, FL 33138 US

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: JULIAN MONTERO

04/25/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: VILAR, ROGRIGO  
Address: 1915 BRICKELL AVE., APT C-411  
City-St-Zip: MIAMI, FL 33129

Title: MGRM ( ) Delete  
Name: MONTERO, JULIAN  
Address: 335 S.W. 18 ROAD  
City-St-Zip: MIAMI, FL 33129

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: MONTERO, JULIAN  
Address: 526 N.E. 103 STREET  
City-St-Zip: MIAMI SHORES, FL 33138

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIAN MONTERO

MGRM

04/25/2005

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