

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020675

Entity Name: LA RESIDENCIA, LLC

FILED
Feb 13, 2009
Secretary of State

Current Principal Place of Business:

3633 SW 58 AVENUE
MIAMI, FL 33155

New Principal Place of Business:

5794 SW 40 STREET
113
MIAMI, FL 33155

Current Mailing Address:

5783 SW 40 STREET
113
MIAMI, FL 33155

New Mailing Address:

5794 SW 40 STREET
113
MIAMI, FL 33155

FEI Number: 57-1170716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MARIA C
3633 SW 58 AVENUE
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

GARCIA, MARIA C
5794 SW 40 STREET
113
MIAMI, FL 33155 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: MARI GARCIA

02/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GARCIA, MARIA C
Address: 3633 SW 58 AVENUE
City-St-Zip: MIAMI, FL 33155

Title: MGR () Delete
Name: JIMENEZ, TERRI M
Address: 3633 SW 58 AVENUE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GARCIA, MARIA C
Address: 5794 SW 40 STREET #113
City-St-Zip: MIAMI, FL 33155

Title: MGR (X) Change () Addition
Name: JIMENEZ, TERRI M
Address: 5794 SW 40 STREET #113
City-St-Zip: MIAMI, FL 33155

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: MARI GARCIA

MGR

02/13/2009

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