


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000040818
 1. Entity Name
 L & L INVESTMENT GROUP LLC.



| | |
|--|--|
| Principal Place of Business 8198 SW 163 AVENUE MIAMI, FL 33193 | Mailing Address 8198 SW 163 AVENUE MIAMI, FL 33193 |
|--|--|

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04212005 No Chg-LLC CR2E083 (10/03)

| | |
|---|---------------------------------------|
| 4. FEI Number 20-0419007 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

BRAVO, LUISA M
 8198 SW 163 AVE
 MIAMI, FL 33193

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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, 2005**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR BRAVO, LUISA M 8198 SW 163 AVENUE MIAMI, FL 33193 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR HERNANDEZ, LUIS A 2100 PONCE DE LEON, SUITE 1200 CORAL GABLES, FL 33134 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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 04/23/05-80050-016 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Luisa M Bravo 4/21/05 (305) 971-8522

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