

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000002136

FILED
Jul 05, 2007
Secretary of State

Entity Name: CUELLAR & JIMENEZ FINANCIAL SERVICES, LLC

Current Principal Place of Business:

7382 NW 112 CT
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

7382 NW 112 CT
MIAMI, FL 33178

New Mailing Address:

FEI Number: 52-1456435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

DON GONZALEZ, P.A.
1820 N CORP. LAKES BLVD #201
WESTON, FL 33326 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: OLANO, GUSTAVO
Address: 7382 NW 112 CT.
City-St-Zip: DORAL, FL 33178

Title: MGR () Delete
Name: JIMENEZ, PATRICIA
Address: 7382 NW 112 CT.
City-St-Zip: DORAL, FL 33178

Title: MGR () Delete
Name: JIMENEZ, ANTONIO
Address: 7382 NW 112 CT.
City-St-Zip: DORAL, FL 33178

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 OLANO

MGR

07/05/2007

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