## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000000973

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

MEDLEY, FL 33178

RUMBOS, FLAVIO

9999 NW 89 AVENUE

MEDLEY, FL 33178

( ) Delete

MGRM

Entity Name: PRODUCTOS LA FINCA, LLC

FILED Apr 27, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1110 BRICKELL AVENUE, SUITE 310 MIAMI, FL 33131 **Current Mailing Address: New Mailing Address:** 1110 BRICKELL AVENUE, SUITE 310 MIAMI, FL 33131 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SERVICES INC., NS CORPORATE NS CORPORATE SERVICES INC 1110 BRICKELL AVENUE, SUITE 310 1110 BRICKELL AVENUE, SUITE 310 MIAMI, FL 33131 US MIAMI, FL 33131 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: NS CORPORATE SERVICES INC 04/27/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete QUINTANA, DARD W Name: Name: 15725 NW 52 AVENUE #107 Address: Address: City-St-Zip: MIAMI, FL 33014 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GUERRERO, DORIS Name: Address: 14153 SW 149 PL Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HERRERA, ANTONIO Name: Name: 9999 NW 89 AVENUE

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Change () Addition

SIGNATURE: DARD QUINTANA **MGRM** 04/27/2007