

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000058809
 1. Entity Name
 THREE AMIGOS FOUR AT JACKSONVILLE, LLC



Principal Place of Business Mailing Address
 3857 WEST 16TH AVENUE 3857 WEST 16TH AVENUE
 HIALEAH, FL 33013 HIALEAH, FL 33013



02152008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3302077	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

LARREA & ORTEGA
 150 ALHAMBRA CIRCLE STE 950
 CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

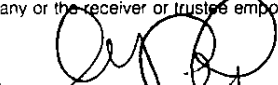
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR CAYON, MAURICIO 3857 WEST 16TH AVENUE HIALEAH, FL 33013
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 03/21/08-80044-003 143.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  03/04/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #