### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT ...

#### DOCUMENT # L05000076964

1. Entity Name

EQUITABLE BUILDING CONTRACTORS, L.L.C.



FILED
May 01, 2007 08:00 AM
Secretary of State

Principal Place of Business

13133 SW 15TH LANE MIAMI, FL 33184 Mailing Address

13133 SW 15TH LANE MIAMI, FL 33184



DO NOT WRITE IN THIS SPACE

04302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 27-0128657

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VAZQUEZ, GERARDO 1401 BRICKELL AVENUE SUITE 500 MIAMI, FL 33131

# 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, a	and accept
	the obligations of registered agent		

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2007

9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BELLO, EYLEEN 13133 SW 15TH LANE MIAMI, FL 33184		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUAREZ BELLO, CASSANDRA A 13133 SW 15TH LANE MIAMI, FL 33184		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SUAREZ BELLO, ANNETTE 13133 SW 15TH LANE MIAMI, FL 33184		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

U00000751728 05/18/07-80115-001 50.00

# DO NOT WRITE IN THIS SPACE

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 accretice 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 of rustee empowered to execute this report as required by Chapter 608, Florida Statutes

CICNIATUDE.

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/16/07

964.325.1378

Daytime Phone #