


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # L05000094567	
1. Entity Name 4-B WAREHOUSES, LLC	

Principal Place of Business 10631 SW 88TH ST SUITE 105 MIAMI, FL 33176	Mailing Address 10631 SW 88TH ST SUITE 105 MIAMI, FL 33176
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DO NOT WRITE IN THIS SPACE



01242008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4023241	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

ARMADA, ALBERT J
 10631 SW 88TH ST
 SUITE 105
 MIAMI, FL 33176

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

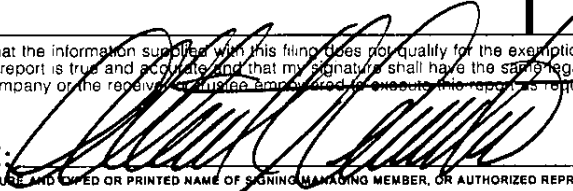
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ARMADA, ALBERT J 10631 SW 88TH ST SUITE 105 MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, ALBERT R 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, JORGE 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, CARLOS 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 04/07/08-80030-023 138.75

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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:  DATE: 3/11/08 DAYTIME PHONE #: 305-266-3930

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