


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000095182 1. Entity Name 20621 SW 125 AVENUE, LLC	
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Principal Place of Business 10300 SW 72ND STREET 318 MIAMI, FL 33173 US	Mailing Address 10300 SW 72ND STREET 318 MIAMI, FL 33173 US
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DO NOT WRITE IN THIS SPACE



03172008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3543507	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

LAVERDE, ALFREDO
 1082 SAN LUIS REY
 WESTON, FL 33326

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	MGRM LAVERDE, ALFREDO 1082 SAN LUIS REY WESTON, FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PARRILLAS OF DAVIE, LC 5001 S UNIVERSITY DRIVE, K FORT LAUDERDALE, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 04/24/08-80083-020-138.75

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:  ALFREDO LAVERDE 04.11.08 7542352772

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #