

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2008 08:00 A
Secretary of State

DOCUMENT # L06000008055

1. Entity Name
ORBIO, LLC



Principal Place of Business
**901 PONCE DE LEON BLVD., SUITE 603
CORAL GABELS, FL 33134**

Mailing Address
**901 PONCE DE LEON BLVD., SUITE 603
CORAL GABELS, FL 33134**



01142008 No Chg LLC CR2C083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
26-0270880

Applied For
Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ALBORNOZ, WILLIAM H
901 PONCE DE LEON BLVD., SUITE 603
CORAL GABELS, 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 _____

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

(NOTE: Registered Agent signature required when renewing)

DATE

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

B. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OSCAR RODRIGUEZ BORGIO 901 PONCE DE LEON BLVD., SUITE 603 CORAL GABELS, FL 33134
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03/27/08-80009-009 138.75

**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 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 606, Florida Statutes.

SIGNATURE: _____

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

Date

Daytime Phone #

2/11/08 (305)444-1741

Oscar Rodriguez-Borgio