


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000093357 1. Entity Name ANTIGUA 6275, LLC	
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Principal Place of Business 782 NW LEJEUNE ROAD, STE #4 MIAMI, FL 33126	Mailing Address 782 NW LEJEUNE ROAD, STE #4 MIAMI, FL 33126
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DO NOT WRITE IN THIS SPACE



01252008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5662495	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

FLEITAS, ROBERTO F
782 NW LEJEUNE ROAD, STE #4
MIAMI, FL 33126

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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 reactivating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$338.75

U000000929952
 02/26/08-80036-023 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KASABDJI, JORGEE 782 NW LEJEUNE ROAD, STE #4 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KASABDJI AYUB, DJABRA 782 NW LEJEUNE ROAD, STE #4 MIAMI, FL 33126
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **1/30/08 786-552-7858**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #