

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000031624

FILED  
Apr 01, 2010  
Secretary of State

Entity Name: HOPE CHEST OF DREAMS LLC

**Current Principal Place of Business:**

C/O ALBERTINA DE LA GUERA  
11545 SW 32ND LANE  
MIAMI, FL 33165 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALBERTINA DE LA GUERA  
11545 SW 32ND LANE  
MIAMI, FL 33165 US

**New Mailing Address:**

FEI Number: 26-2273074      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CLAYTON PARALEGAL SERVICES, INC.  
C/O MARIA D. GRANDA-CLAYTON  
7443 BIG CYPRESS DRIVE  
MIAMI LAKES, FL 33014 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DE LA GUERA, ALBERTINA  
Address: 11545 SW 32ND LANE  
City-St-Zip: MIAMI, FL 33165 US

Title: MGR  
Name: GRANDA-CLAYTON, MARIA D  
Address: 11545 SW 32ND LANE  
City-St-Zip: MIAMI, FL 33165 US

Title: MGR  
Name: SANCHEZ, GEORGINA  
Address: 11545 SW 32ND LANE  
City-St-Zip: MIAMI, FL 33165

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: ALBERTINA DE LA GUERA      MGR      04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date