

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000076600

FILED  
Mar 09, 2011  
Secretary of State

Entity Name: OPTIONS ENTERPRISES, LLC

**Current Principal Place of Business:**

5720 NW 113RD PL  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

5720 NW 113RD PL  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 27-0685492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORRAL, GUSTAVO  
5720 NW 113RD PL  
DORAL, FL 33178 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: MGRM  
Name: CORRAL, GUSTAVO  
Address: 5720 NW 113RD PL  
City-St-Zip: DORAL, FL 33178

Title: MGRM  
Name: SAAVEDRA, GLADYS  
Address: 5720 NW 113RD PL  
City-St-Zip: DORAL, FL 33178

Title: MGRM  
Name: CORRAL, MARIA J  
Address: 5720 NW 113RD PL  
City-St-Zip: DORAL, FL 33178

Title: MGRM  
Name: CORRAL, GUSTAVO A  
Address: 300 MADEIRA AVE, APT # 101  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: CORRAL, LUIS F  
Address: 5720 NW 113RD PL  
City-St-Zip: DORAL, FL 33178

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: GUSTAVO A CORRAL

MGRM

03/09/2011

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