

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002670

FILED
Apr 14, 2008
Secretary of State

Entity Name: CAMPOS TOOL SUPPLIES, L.C.

Current Principal Place of Business:

13899 BISCAYNE BOULEVARD
SUITE 225
NORTH MIAMI BEACH, FL 33181

New Principal Place of Business:

Current Mailing Address:

13899 BISCAYNE BOULEVARD
SUITE 225
NORTH MIAMI BEACH, FL 33181

New Mailing Address:

FEI Number: 65-0877185 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS & RUBIN, P.A.
9200 S DADELAND BLVD
603
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

EDGAR, IVAN CAMPOS
13899 BISCAYNE BOULEVARD SUITE 225
MIAMI, FL 33181 US

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: IVAN CAMPOS

04/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAMPOS, EDGAR IVAN
Address: 21055 YACHT CLUB DRIVE #1204
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: CAMPOS, GERMAN RENE
Address: 13899 BISCAYNE BOULEVARD SUITE 225
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: MGRM () Delete
Name: CAMPOS, JORGE NADHRY
Address: 13899 BISCAYNE BOULEVARD SUITE 225
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: MGRM () Delete
Name: CAMPOS, DENISE XIMENA
Address: 13899 BISCAYNE BOULEVARD SUITE 225
City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: MGRM () Delete
Name: CAMPOS, ANA EDILMA BAR
Address: 13899 BISCAYNE BOULEVARD SUITE 225
City-St-Zip: NORTH MIAMI BEACH, FL 33181

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: IVAN CAMPOS

MR

04/14/2008

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