

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003062

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** ANORCA, L.L.C.

**Current Principal Place of Business:**

8222 NW SOUTH RIVER DR  
MEDLEY, FL 33166

**New Principal Place of Business:**

3601 NW 55 STREET  
SUITE 202  
MIAMI, FL 33142

**Current Mailing Address:**

8222 NW SOUTH RIVER DR  
MEDLEY, FL 33166

**New Mailing Address:**

3601 NW 55 STREET  
SUITE 202  
MIAMI, FL 33142

FEI Number: 65-0929776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ, RAFAEL A  
201 ALHAMBRA CIRCLE  
SUITE 702  
MIAMI, FL 33134 US

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

PEREZ, RAFAEL A  
201 ALHAMBRA CIRCLE  
SUITE 711  
MIAMI, FL 33134 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: RAFAEL A PEREZ

04/29/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CASARIEGO, HUMBERTO F  
Address: 8222 NW SOUTH RIVER DR  
City-St-Zip: MEDLEY, FL 33166

Title: MGRM ( ) Delete  
Name: CASARIEGO, ORLANDO J  
Address: 8222 NW SOUTH RIVER DR  
City-St-Zip: MEDLEY, FL 33166

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CASARIEGO, HUMBERTO F  
Address: 3601 NW 55 STREET, SUITE 202  
City-St-Zip: MIAMI, FL 33142 US

Title: MGRM (X) Change ( ) Addition  
Name: CASARIEGO, ORLANDO J  
Address: 3601 NW 55 STREET, SUITE 202  
City-St-Zip: MIAMI, FL 33142 US

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: ORLANDO J. CASARIEGO

MGRM

04/29/2008

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