2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000009411

Entity Name
 MACA DEVELOPERS LLC



FILED
Mar 30, 2007 08:00 AM
Secretary of State

Principal Place of Business

3857 W 16 AVE HIALEAH, FL 33012 Mailing Address

3857 W 16 AVE HIALEAH, FL 33012



01292007 No Chg-LLC

CR2E083 (11/05)

Fee Required

4. FEI Number	 Applied For	
65-1081313	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

CAYON, MAURICIO 3857 W 16 AVE HIALEAH, FL 33012

DO	NOT	WRITE
IN	THIS	SPACE

	above named entity submits this statement for the purpose of cha obligations of registered agent.	inging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNA	TURE		
	Signature, typed or printed name of registered agent and title if applicable.	(NQTE: Registered Agent signature required when reinstating)	DATE
	Filing Fee Is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM	# No. 10 Per 10	
			•

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE

04/06/07-80004-025 50.00

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11. I hereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #