

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065640

FILED
Jan 21, 2009
Secretary of State

Entity Name: HCC SERVICES LLC

Current Principal Place of Business:

7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143

New Mailing Address:

FEI Number: 61-1567495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE MENDIA, CARLOS F
7800 SOUTH WEST 57TH AVENUE, STE. 207E
MIAMI, FL 33143 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 () Delete
Name: DE MENDIA, CARLOS F
Address: 7800 SOUTH WEST 57TH AVENUE, STE. 207E
City-St-Zip: MIAMI, FL 33143

Title: MGRM () Delete
Name: MENDIA, CARLOS G
Address: 14708 GOLDEN LEAF PLACE
City-St-Zip: LOUISVILLE, KY 40245

Title: MGRM () Delete
Name: BEAUPERTHUY, CRISTINA M
Address: 6464 CABALLERO BLVD.
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM () Delete
Name: MENDIA, IRMA
Address: 2005 EAGLE POINT DRIVE
City-St-Zip: DALTON, GA 30720

Title: MGRM () Delete
Name: DE MENDIA, IRMA A
Address: 1120 S. ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: MENDIA, CARLOS G
Address: 7800 SW 57TH AVE, SUITE 207 E
City-St-Zip: MIAMI, FL 33143

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: C F DE MENDIA

MGRM

01/21/2009

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