

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045745

Entity Name: LARA, LLC

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

2121 PONCE DE LEON BLVD.
SUITE 740
CORAL GABLES, FL 33134

New Principal Place of Business:

7869 NW 52 STREET
DORAL, FL 33166

Current Mailing Address:

PO BOX 398208
MIAMI BEACH, FL 33239

New Mailing Address:

7869 NW 52 STREET
DORAL, FL 33166

FEI Number: 20-8941084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIRONIO, RONAN
2121 PONCE DE LEON BLVD.
740
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PIRONIO, RONAN
7869 NW 52 STREET
DORAL, FL 33166 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: RONAN PIRONIO

02/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIRONIO, RONAN
Address: 2121 PONCE DE LEON BLVD. # 740
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: MACERA, NORBERTO
Address: 2121 PONCE DE LEON BLVD. # 740
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PIRONIO, RONAN
Address: 7869 NW 52 STREET
City-St-Zip: DORAL, FL 33166

Title: MGRM (X) Change () Addition
Name: MACERA, NORBERTO
Address: 7869 NW 52 STREET
City-St-Zip: DORAL, FL 33166

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: RONAN PIRONIO

MGR

02/27/2009

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