## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000070324

13973 NORTH CYPRESS COVE CIRCLE

**DAVIE. FL 33325** 

Address:

City-St-Zip:

Entity Name: SYMPHONY PROPERTIES & INVESTMENTS, LLC

FILED Apr 05, 2009 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 14064 N. CYPRESS COVE CIRCLE DAVIE, FL 33325 **Current Mailing Address: New Mailing Address:** 14064 N. CYPRESS COVE CIRCLE DAVIE, FL 33325 US FEI Number: 20-3164791 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEL SOCORRO, JINKEE 14064 N. CYPRÉSS COVE CIRCLE **DAVIE, FL 33325** 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete RUIZ-GO, ROSALINE J Name: Name: Address: 335 LEGARE CT Address: City-St-Zip: JUPITER, FL 33458 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition DEL SOCORRO, JINKEE Name: Name: Address: 14064 N. CYPRESS COVE CIRCLE Address: City-St-Zip: DAVIE, FL 33325 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition CORTERO, HAZEL S Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JINKEE DEL SOCORRO MGRM 04/05/2009