

2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

**FILED**  
**Feb 05, 2004 8:00 am**  
**Secretary of State**

02-05-2004 90077 017 \*\*\*\*50.00

DOCUMENT # L00000001455

1. Entity Name

SANRO INDUSTRIES AND TRADING, L.L.C.



Principal Place of Business

11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410

Mailing Address

11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410



01122004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0996600

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PUMPHREY, GERALD ESQ.  
11000 PROSPERITY FARMS ROAD, SUITE 300  
PALM BEACH GARDENS, FL 33410

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ROJAS, RAUL
STREET ADDRESS	6800 SW 40TH ST PMB 118
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	MGRM
NAME	CHIANG, JULIA VICTORIA
STREET ADDRESS	6800 SW 40TH ST PMB 118
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

*Paul Rojas* - PAUL ROJAS 1/25/04 305-6207379