

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007395

Entity Name: GOODMAN RIVER, LLC

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

2460 SW 137 AVE  
253  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 65-0160  
MIAMI, FL 33265

**New Mailing Address:**

FEI Number: 65-1018373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AGUIRRE, EDUARDO  
2460 SW 137 AVE  
253  
MIAMI, FL 33175 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: MGRM ( ) Delete  
Name: AGUIRRE, ALEJANDRO  
Address: 2460 SW 137 AVE 253  
City-St-Zip: MIAMI, FL 33175

Title: MGRM ( ) Delete  
Name: AGUIRRE, EDUARDO  
Address: 2460 SW 137 AVE 253  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES:**

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: ALEJANDRO AGUIRRE

MGRM

04/23/2009

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