

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012036

Entity Name: MOGO CONSTRUCTION, L.L.C.

FILED
Mar 28, 2008
Secretary of State

Current Principal Place of Business:

21400 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

21400 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

FEI Number: 65-1043885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LILIAN SREDNI, P.A.
1400 NE MIAMI GARDENS DRIVE
SUITE 208
NORTH MIAMI BEACH, FL 33179 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: GORIN, MOISES
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGR () Delete
Name: GORIN, ANA
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGR () Delete
Name: GORIN, ISAAC
Address: 21400 WEST DIXIE HIGHWAY
City-St-Zip: NORTH MIAMI BEACH, FL 33180

ADDITIONS/CHANGES:

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: MOISES GORIN

MGR

03/28/2008

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