


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 23, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000006619</b>	
1. Entity Name <b>GIL FAMILY LLC</b>	

Principal Place of Business <b>7300 SW 93RD AVENUE 210 MIAMI, FL 33173</b>	Mailing Address <b>7300 SW 93RD AVENUE 210 MIAMI, FL 33173</b>
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01032007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-1107906</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>GIL, AUGUSTO J 9360 SUNSET DR. #291 MIAMI, FL 33173</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIL, AUGUSTO J 7300 SW 93 AVE STE. 210 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIL, JULIA 7300 SW 93 AVE STE. 210 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALEJANDRO, GIL 7300 SW 93 AVE STE 210 MIAMI, FL 33173
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U00000599446  
01/25/07-80028-015 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Julia Gil* *Julia G. L* *1/15/07* *(305) 598-4002*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #