

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000013368 1. Entity Name CAYON, LLC	
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Principal Place of Business 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126	Mailing Address 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
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02092005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 37-1432469	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MARQUEZ, JOSE M 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126	DO NOT WRITE IN THIS SPACE
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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, 2005**

U000000227615
02/14/05-80005-020 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRAN, MANUEL A 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRAN, JOSE A 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRAN, ANA MARI 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRAN, EZEQUIEL 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRAN, ANTOLIN 782 NW LEJEUNE RD., STE. 548 MIAMI, FL 33126
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:  **EZEQUIEL HERRAN** **FEB-09-05 305-5593131**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #