

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90230 025 ****50.00

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1. Entity Name
V.A.C. BUILDERS, L.L.C.



Principal Place of Business
10300 SW 72 Street
Suite 470 C
Miami, FL 33173

Mailing Address
10300 SW 72 Street
Suite 470 C
Miami, FL 33173



01182004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1134500

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

VALDERRAMA, JUAN LUIS
12350 S.W. 132 CT., STE. 207
MIAMI, FL 33186

**DO NOT WRITE
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 D
NAME SANTA MONICA DEVELOPMENT CORP
STREET ADDRESS 10300 SW 72 St. #470C
CITY - ST - ZIP MIAMI, FL 33173

TITLE D
NAME INTEGRAL BUSINESS AND INVEST
STREET ADDRESS 10300 SW 72 St. #470C
CITY - ST - ZIP MIAMI, FL 33173

TITLE D
NAME SANTA LUCIA DEVELOPMENT CORP
STREET ADDRESS 10300 SW 72 St. #470C
CITY - ST - ZIP MIAMI, FL 33173

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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

06/18/04

Date

Daytime Phone #