

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # L01000020316

1. Entity Name
AUBURNDALE LLC



Principal Place of Business
**3461 SW 8 STREET
MIAMI, FL 33135**

Mailing Address
**3461 SW 8 STREET
MIAMI, FL 33135**



02202008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3657702	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CAZO, ARMANDO
3461 S.W 8TH ST
MIAMI, FL 33135**

**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 _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CAZO, ALEX 3461 SW 8 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CAZO, ARMANDO 3461 SW 8 STREET MIAMI, FL 33135
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CAZO, ESPERANZA 3461 SW 8 STREET MIAMI, FL 33135
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04/08/08-80031-009 143.75

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-18-08. 305-448-3280.

Date

Daytime Phone #