

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022255

FILED
Apr 30, 2008
Secretary of State

Entity Name: BRACHO MUTISERVICES L.L.C.

Current Principal Place of Business:

5461 W. 24 AVE.
SUITE 32
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

5461 W. 24 AVE.
SUITE 32
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 26-0002660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIVAS, MORELA J
5461 W. 24 AVE.
SUITE 32
HIALEAH, FL 33016 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: VIVAS, MORELA J
Address: 5461 W. 24 AVE. STE 32
City-St-Zip: HIALEAH, FL 33016

Title: MGR () Delete
Name: HECMAR ILUSION RONDO, N BRACHO
Address: 5461 W. 24 AVE. STE.32
City-St-Zip: HIALEAH, FL 33016

Title: MGR () Delete
Name: MARGARITA LEONOR BRA, CHO OCHOA
Address: 5461 W. 24 AVE. STE.32
City-St-Zip: HIALEAH, FL 33016

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: MORELA J VIVAS

P

04/30/2008

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