

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000548

FILED
Jan 04, 2008
Secretary of State

Entity Name: BBR, L.L.C.

Current Principal Place of Business:

9727 NORTHWEST 44 TERRACE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

9727 NORTHWEST 44 TERRACE
MIAMI, FL 33178

New Mailing Address:

FEI Number: 75-2975425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC.
550 BILTMORE WAY
MEZZANINE - SUITE 200
CORAL GABLES, FL 33134 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: BALESTRINI, ULISES J
Address: 9727 N.W. 44TH TERR.
City-St-Zip: MIAMI, FL 33178

Title: MGR () Delete
Name: BALESTRINI, ULISES
Address: 9727 NORTHWEST 44 TERRACE
City-St-Zip: MIAMI, FL 33178

Title: MGR () Delete
Name: ROJAS, JUAN
Address: 9727 NORTHWEST 44 TERRACE
City-St-Zip: MIAMI, FL 33178

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: ULISES J BALESTRINI

MGR

01/04/2008

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