


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 05, 2007 08:00 A
Secretary of State

DOCUMENT # L02000006899 1. Entity Name MADRIGAL ENTERPRISES LLC	
---	---

Principal Place of Business 7195 W. 12TH AVE. HIALEAH, FL 33014	Mailing Address 7195 W. 12TH AVE. HIALEAH, FL 33014
---	---

DO NOT WRITE IN THIS SPACE



01262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 82-0573435	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**MADRIGAL, JOSE DONALD
12915 SW 43 COURT
MIRAMAR, FL 33027**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000657270
03/14/07-80055-016 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MADRIGAL, JOSE DONALD 12915 SW 43 COURT MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MADRIGAL, MIRIAM S 12915 SW 43 COURT MIRAMAR, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 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

Jose D. Madrigal **8-1-07** **786-621-0793**

Date

Daytime Phone #