2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT #L02000010185

1. Entity Name
VALERIA, LLC

Principal Place of Business	Mailing Address
3735 SW 8TH STREET SUITE 105 CORAL GABLES, FL 33134 US	3735 SW 8TH STREET SUITE 105 CORAL GABLES, FL 33134 US

DO NOT WRITE IN THIS SPACE

04112007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
54-2084285	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ARAGON, HECTOR
3735 SW 8TH STREET
SUITE 105
CORAL GABLES, FL 33134

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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, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME	ARAGON, HECTOR	
STREET ADDRESS	3735 SW 8TH STREET, SUITE 105	
CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE		
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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: _____   4/16/07   305 569 0016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #