

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024632

Entity Name: ACH ACQUISITIONS, LLC

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

1515 N. FEDERAL HWY
STE 300
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1515 N. FEDERAL HWY
STE 300
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 51-0470093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSAS, ANDREW N
1515 N. FEDERAL HWY
BOCA RATON, FL 33432 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: MGRM () Delete
Name: CASSAS, ANDREW N
Address: 1515 N. FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33432

Title: MGR () Delete
Name: CASSAS, GAIL
Address: 1515 N. FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: ROGERS, CHRISTINE
Address: 1515 N. FEDERAL HWY
City-St-Zip: BOCA RATON, FL 33432

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: ANDREW N. CASSAS

MGRM

01/08/2008

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