2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2008
Secretary of State

DOCUMENT# L02000026819

Entity Name: HERNANDEZ CONSTRUCTION, LLC

Current Principal Place of Business:

441 NE 4TH AVENUE
SUITE 100
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

441 NE 4TH AVENUE
SUITE 100
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 32-0036722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STILES CORPORATION
ATTN: STEPHEN R. PALMER
300 SE 2ND STREET
FT. LAUDERDALE, FL 33301 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:	HERNANDEZ, ALEX	
Address:	441 NE 4TH AVENUE, SUITE 100	
City-St-Zip:	FORT LAUDERDALE, FL 33301	
Title:	MGR	( ) Delete
Name:	PALMER, STEPHEN R	
Address:	300 SE 2ND STREET	
City-St-Zip:	FORT LAUDERDALE, FL 33301	
Title:	MGR	( ) Delete
Name:	JONES, PATRICIA A	
Address:	300 SE 2ND STREET	
City-St-Zip:	FORT LAUDERDALE, FL 33301	

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: ALEX HERNANDEZ PRES 03/26/2008

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