

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT # L02000027633

1. Entity Name
REEL BIG SUBS, L.L.C.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL 20 PM 2:54

Principal Place of Business
20218 OLD CUTLER ROAD
MIAMI, FL 33189

Mailing Address
20218 OLD CUTLER RD
MIAMI, FL 33189

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05242007 Chg-LLC CR2E083 (12/06)

4. FEI Number
22-3885135

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEST, SANDRA L ESQ.
C/O JOHN H. TEST, P.A.
8900 SW 117 AVENUE, SUITE B-105
MIAMI, FL 33186

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Amended AR is \$50.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
BARRIENTOS, PABLO G ☒ Delete
18540 SW 88 ROAD
MIAMI, FL 33157

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
LOIS A Mata ☐ Change ☒ Addition
10982 SW 247th terr
Miami, FL 33032

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
BARRIENTOS, PABLO G ☒ Delete
18540 SW 88 ROAD
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NAME
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Rosa P Moysam ☐ Change ☒ Addition
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☐ Change ☐ Addition

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07/24/07--01061--012 **50.00

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CITY-ST-ZIP

☐ Delete

TITLE
NAME
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CITY-ST-ZIP

☐ Change ☐ Addition

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

6-1-07