

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000034508

1. Entity Name
CORAL GARDENS MANSIONS, L.L.C.



Principal Place of Business

12591 SW 134 CT
SUITE 105
MIAMI, FL 33186

Mailing Address

12591 SW 134 CT
SUITE 105
MIAMI, FL 33186

FILED
Aug 08, 2008 08:00 AM
Secretary of State



07072008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
54-2094019

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAW OFFICE OF FERNANDO POMARES, PA
12002 SW 128 CT
SUITE 104
MIAMI, FL 33186

**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

Fernando Pomares, Attorney

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/3/08

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HERNANDEZ, NILO A
STREET ADDRESS	PO BOX 652137
CITY-ST-ZIP	MIAMI, FL 33265
TITLE	MGR
NAME	MESA, JORGE
STREET ADDRESS	PO BOX 652137
CITY-ST-ZIP	MIAMI, FL 33265
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000957410
08/08/08-80007-021 138.75

**DO NOT WRITE
IN THIS SPACE**

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:

Customly Nilo Hernandez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8/3/08

Date

305-385-9400

Daytime Phone #