


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000001872 1. Entity Name W, R&E, LLC	
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Principal Place of Business 9 E 20TH STREET HIALEAH, FL 33010	Mailing Address 9 E 20TH STREET HIALEAH, FL 33010
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DO NOT WRITE IN THIS SPACE



04242007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 16-1650373	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent ESTRADA, LUIS 9 E 20TH STREET HIALEAH, FL 33010
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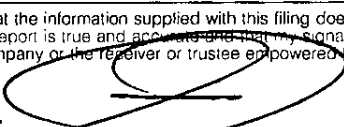
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>

Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM ESTRADA, LUIS 9 E 20TH STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM ESTRADA, LUIS JR 9 E 20TH STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM GARCIA, ROSA 9 E 20TH STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

<p>U00000745185 05/16/07-80019-012 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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:  LUIS ESTRADA VICE PRESIDENT 4-26-07 305-885-0731 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>