

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90087 041 ***138.75

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DOCUMENT # L03000008129 1. Entity Name ROCKBRAND CONSTRUCTION, LLC.					
Principal Place of Business 216 S.W. 12TH AVENUE MIAMI, FL 33130			Mailing Address 216 S.W. 12TH AVENUE MIAMI, FL 33130		
2. Principal Place of Business - No P.O. Box # 406 N.W. 22 Ave.		3. Mailing Address Same			
Suite, Apt. #, etc. 203		Suite, Apt. #, etc.			
City & State Miami, FL		City & State		4. FEI Number 13-4248039	
Zip 33125		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
- 6. Name and Address of Current Registered Agent ROCKBRAND, ANIBAL 13255 S.W. 137TH AVENUE SUITE 207 MIAMI, FL 33186			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROCKBRAND, ANIBAL 13255 SW 137TH AVENUE, SUITE 207 MIAMI, FL 33186	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PENA, EDDY 3450 NW 95 TERRACE MIAMI, FL 33135	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PENA, EDDY 3450 NW 95 TERRACE MIAMI, FL 33135	<input type="checkbox"/> Delete			
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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: _____ 1/4/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					