

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009169

FILED
Apr 29, 2008
Secretary of State

Entity Name: AKOA, A LIMITED LIABILITY COMPANY

Current Principal Place of Business:

17150 ROYAL PALM BOULEVARD
SUITE 2
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

17150 ROYAL PALM BOULEVARD
SUITE 2
WESTON, FL 33326

New Mailing Address:

FEI Number: 54-2107215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUJOL, JOE L
267 MINORCO AVE STE 100
CORAL GABLES, FL 33134 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: MGRM () Delete
Name: VELA, JAIRO H
Address: 891 GARNET CIRCLE
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: GARZON, CRISANTO
Address: 2700 PINEHURST DR
City-St-Zip: WESTON, FL 33327

Title: MGRM () Delete
Name: YOKANA, ALBERT ALEXAND
Address: 809 CRESTVIEW CIRCLE
City-St-Zip: WESTON, FL 33327

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: JAIRO VELA

MGRM

04/29/2008

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