

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018339

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: POU PAINTING LLC

**Current Principal Place of Business:**

8219-C SW 107 AVENUE  
MIAMI, FL 33173

**New Principal Place of Business:**

121 ORQUIDEA AVENUE  
CORAL GABLES, FL 33143

**Current Mailing Address:**

8219-C SW 107 AVENUE  
MIAMI, FL 33173

**New Mailing Address:**

121 ORQUIDEA AVENUE  
CORAL GABLES, FL 33143

FEI Number: 55-0837596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POU, CARLOS J  
8219-C SW 107 AVENUE  
MIAMI, FL 33173 US

**Name and Address of New Registered Agent:**

POU, CARLOS J  
121 ORQUIDEA AVENUE  
CORAL GABLES, FL 33143 US

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:

04/24/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: POU, CARLOS J  
Address: 8219-C SW 107 AVENUE  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: POU, CARLOS J  
Address: 121 ORQUIDEA AVENUE  
City-St-Zip: CORAL GABLES, FL 33143

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: CARLOS JAVIER POU

MGRM

04/24/2008

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