


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 06, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # L03000028081 1. Entity Name ZORY'S ENTERPRISE, LLC.	
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Principal Place of Business 2975 NW 17 AVENUE MIAMI, FL 33142	Mailing Address 2975 NW 17 AVENUE MIAMI, FL 33142
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**DO NOT WRITE IN THIS SPACE**



03132007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 01-0793257	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, RAFAEL F  
2975 NW 17 AVENUE  
MIAMI, FL 33142

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FERNANDEZ, RAFAEL F 2975 NW 17 AVENUE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FERNANDEZ, ZORAIDA 2975 NW 17 AVENUE MIAMI, FL 33142
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04/13/07-80051-024 50.00

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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: *Zoraida Fernandez* 42-07 (86)282 9734

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #