

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030830

Entity Name: GINCORP, L.L.C.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

1000 ISLAND BLVD. #2802
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

1000 ISLAND BLVD. #2802
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 65-1203771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOEL KORNBERG, M.D., J.D., P.A.
7301-A WEST PALMETTO PARK RD, STE 305C
BOCA RATON, FL 33433 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: MGR () Delete
Name: GINES, ROBERTO
Address: 1000 ISLAND BLVD., #2802
City-St-Zip: AVENTURA, FL 33160

Title: MGR () Delete
Name: GINES, JOLANTA
Address: 1000 ISLAND BLVD., #2802
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

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: ROBERTO GINES

MGR

01/07/2008

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