2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000034585

1. Entity Name
SELVA LLC

Principal Place of Business	Mailing Address
11244 SW 133 TERR MIAMI, FL 33176	11244 SW 133 TERR MIAMI, FL 33176

DO NOT WRITE IN THIS SPACE

03122007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-1427332	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

VALDES, MIGUEL A
12625 SW 43 STREET
MIAMI, FL 33175

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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

3-12-07

Filing Fee is $50.00
Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	VALDES, MIGUEL A
STREET ADDRESS	11244 SW 133 TERR
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	MGR
NAME	PEREZ, SELFA
STREET ADDRESS	7564 SW 43 STREET
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/02/07-80108-011 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: _____Miguel Valdes____ MGR

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