

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90007 036 ****50.00

DOCUMENT # L03000035005

1. Entity Name
JUNCOS COMPETICION, LLC



Principal Place of Business
**3970 NW 132ND ST., SUITE E
OPA LOCKA, FL 33054**

Mailing Address
**3970 NW 132ND ST., SUITE E
OPA LOCKA, FL 33054**



01132005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
73-1680425

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JUNCOS, RICARDO
3970 NW 132 STREET, BAY E
OPA LOCKA, FL 33054**

**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

**Filing Fee is \$50.00
Due by May 4, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
JUNCOS, RICARDO
1800 NE SANS SAUCI BLVD. #338
N. MIAMI, FL 33181**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

01/13/05