

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90160 026 ***138.75

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**

50004871

2. Principal Place of Business - No P.O. Box #
7465 COMMERCIAL CIRCLE
Suite, Apt. #, etc.

3. Mailing Address
7465 COMMERCIAL CIRCLE
Suite, Apt. #, etc.



04142008 Chg-LLC CR2E083 (12/06)

City & State
FORT PIERCE, FL
Zip
34951 Country
Port-St. Lucie

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FORT PIERCE, FL
Zip
34951 Country
Port-St. Lucie

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 132ND STREET
BAY E
OPA LOCKA, FL 33054**

7. Name and Address of New Registered Agent

Name **RICARDO JUNCOS**
Street Address (P.O. Box Number is Not Acceptable)
7465 COMMERCIAL CIRCLE
City **FORT PIERCE** FL Zip Code
34951

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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
JUNCOS, DANIELLE
1115 RIVER BIRCH ST
HOLLYWOOD, FL 33019** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
JUNCOS, RICARDO
1996 GREY FALCON CIRCLE S.W.
VERO BEACH, FL 32962** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
JUNCOS, DANIELLE
1996 GREY FALCON CIRCLE S.W.
VERO BEACH, FL 32962** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

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

Date

Daytime Phone #