2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000039160

1. Entity Name 630 LLC

FILED Apr 19, 2006 08:00 AN Secretary of State

Principal Place of Business

6925 S.W. 8TH STREET MIAMI, FL 33134 Mailing Address

6925 S.W. 8TH STREET MIAMI, FL 33134



DO NOT WRITE IN THIS SPACE

03072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0967262

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytima Phone #

6. Name and Address of Current Registered Agent

NO TYPED OR PRINTED NAME OF SIGNING

DEL REY, JULIO JR. 6925 S.W. 8TH STREET MIAMI, FL 33134

SIGNATURE:

SIGNATURE

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan- tions of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am lamillar with, and accep
SIGNATURE.	Signature, typed or printed name of registered agent and title # applicable.	(NOTE Registered Agent a gnature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEL REY, JULIO JR. 6925 S.W. 8TH STREET MIAMI, FL 33134	U00000518376
TITLE NAME STREET ADDRESS CITY-57-ZIP		05/02/06-80008-011 55.00
THLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby indicated limited lia	certify that the information supplied with this filing does not of on this report is true and accurate and that my signature of ability company or the receiver or trustge empowered to execute the company of the receiver or trustge empowered to execute the company of the receiver or trustge empowered to execute the company of the receiver or trustge empowered to execute the company of the compa	qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath, that I am a managing member or manager of the ecute this report as required by Chapter 608, Florida Statutes.

ANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE