

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039220

FILED
Feb 20, 2009
Secretary of State

Entity Name: LOS ARBOLES LIMITED LIABILITY COMPANY

Current Principal Place of Business:

621 NW 53RD STREET
SUITE 240
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 970895
BOCA RATON, FL 33497

New Mailing Address:

FEI Number: 20-0308271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JASON WEAVER P.A.
3531 GRIFFIN ROAD
FORT LAUDERDALE, FL 33312 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: SCHNEIDER, LAWRENCE M
Address: 21401 CRESTFALLS CT
City-St-Zip: BOCA RATON, FL 33428

Title: MGR () Delete
Name: SCHNEIDER, ADAM N
Address: 22360 SIESTA KEY DR
City-St-Zip: BOCA RATON, FL 33428

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: ADAM N SCHNEIDER

MGR

02/20/2009

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