2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000048379

1. Entity Name BERMAELA, L.L.C.



FILED Feb 08, 2007 08:00 AN Secretary of State

Principal Place of Business

3301 PONCE DE LEON BLVD, STE 210 CORAL GABLES, FL 33146

Mailing Address

3301 PONCE DE LEON BLVD, STE 210 CORAL GABLES, FL 33146



DO NOT WRITE IN THIS SPACE

02012007 No Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For

5. Certificate of Status Desired

20-0447286

Not Applicable \$5.00 Additional

6. Name and Address of Current Registered Agent

SASSO, PAUL R ESQ 7721 SW 62 AVE, STE 202 SOUTH MIAMI, FL 33143

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its register	ed offi	ce or registered agent	, or both, in the	State of Florida.	l am familiar with, a	and accept
	the obligations of registered agent.	•	15.1				

SIGNATURE

Signature, typed or printed name of registered agent and little if applicable

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM M.J.G. OF SOUTH FLORIDA, INC. 3301 PONCE DE LEON BLVD, STE 210 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM E.J.G. OF SOUTH FLORIDA, INC. 3301 PONCE DE LEON BLVD, STE 210 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CRIMCOV OF AMERICA, INC. 3301 PONCE DE LEON BLVD, STE 210 CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		

1000000678585 02/16/07 60023-004 55.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

02/02/09

Daytime Phone #