

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000048379

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



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



02012008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-0447286

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME M.J.G. OF SOUTH FLORIDA, INC.
STREET ADDRESS 3301 PONCE DE LEON BLVD, STE 210
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE MGRM
NAME E.J.G. OF SOUTH FLORIDA, INC.
STREET ADDRESS 3301 PONCE DE LEON BLVD, STE 210
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE MGRM
NAME CRIMCOV OF AMERICA, INC.
STREET ADDRESS 3301 PONCE DE LEON BLVD, STE 210
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000824798
02/20/08-80093-012 143.75

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:

MARIA GIRONDO

02/04/08

305/567-2885

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

Date

Daytime Phone #