2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000050637

1. Entity Name

AAA MIRROR & GLASS STUDIO LLC



Principal Place of Business

11061 SW 57 ST

MIAMI, FL 33173

Mailing Address

11061 SW 57 ST MIAMI, FL 33173

FILED Apr 21, 2005 8:00 am Secretary of State

04-21-2005 90025 003 ****55.00



04192005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

305-595-5041

5. Certificate of State

VOITE

6.	Name	and	Address	of	Current	Reg	istered	Agent

CHIRINO, ANGEL 11061 SW 57 ST MIAMI, FL 33173

CITY-ST-ZIP

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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. It am familiar with, and accept the obligations of registered agent.									
SIGNATURE.	Signature, typed or printed name of registered agent and title # applicable.	(NOTE: Registered Agent signature required when reinstating)			DATÉ				
F	lling Fee is \$50.00 ue by May 1, 2005								
9.	MANAGING MEMBERS/MANAGERS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHIRINO, ANGEL 11061 SW 57 ST MIAMI, FL 33173								
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
DTLE NAME STREET ADDRESS CITY-ST-ZIP	 -	-	· 	DO NOT WR	ITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPA	CE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·							
TITLE '									

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 companyor the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

AMGEL CHIRINO

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