


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000009720 1. Entity Name ANGEL CUSTOM CREATIONS, "LLC"	
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Principal Place of Business 1065 EAST 29 ST. HIALEAH, FL 33013 US	Mailing Address 1065 EAST 29 ST. HIALEAH, FL 33013 US
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DO NOT WRITE IN THIS SPACE



03212008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-0205848	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent RODRIGUEZ, BRUNO A 1065EAST 29 ST HIALEAH, FL 33013
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**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. 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)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	DATE 04/17/08-80018-022 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, BRUNO A 50N.E.7TH AVE. HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RODRIGUEZ, MAGGIE 50 N.E. 7TH AVE. HIALEAH, FL 33010
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Maggie Rodriguez **4-3-08 305-696-6150**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #