, 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000013385

1. Entity Name SOTO LLC



FILED Apr 30, 2007 08:00 A Secretary of State

Principal Place of Business

4431 S.W. 1ST STREET MIAMI, FL 33134

Mailing Address

4431 S.W. 1ST STREET MIAMI, FL 33134



01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1619680

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SOTO, MOISES 4431 S.W. 1ST STREET MIAMI, FL 33134

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 nemo of registered agent and title if applicable. INOTE: Registered Agent signature required when reinstating) DATE		
Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOTO, MOISES 4431 S.W. 1ST STREET MIAMI, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·
TITLE NAME STREET ADDRESS CHY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000743460 05/15/07-80108-021 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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: NG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #