

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013864

Entity Name: ERNESTO R TORRES, LLC

FILED  
Apr 09, 2005  
Secretary of State

**Current Principal Place of Business:**

15020 SW 297 STREET  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

**Current Mailing Address:**

15020 SW 297 STREET  
HOMESTEAD, FL 33033

**New Mailing Address:**

FEI Number: 20-0751901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORRES, ERNESTO R  
15020 SW 297 STREET  
HOMESTEAD, FL 33033 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: TORRES, ERNESTO R  
Address: 15020 SW 297 STREET  
City-St-Zip: HOMESTEAD, FL 33033

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: FERNANDEZ, ANA M  
Address: 15020 SW 297 STREET  
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ERNESTO R TORRES

MGR

04/09/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date