

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017905

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** ROMO INVESTMENT PROPERTIES, LLC

**Current Principal Place of Business:**

841 EAST 18TH ST.  
HIALEAH, FL 33013

**New Principal Place of Business:**

**Current Mailing Address:**

13300 NW 42 AVE  
OPA-LOCKA, FL 33054

**New Mailing Address:**

**FEI Number:** 04-3810020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLDEN, RICHARD A  
12000 BISCAYNE BLVD, STE 500  
NORTH MIAMI, FL 33181 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ROMO, ELOY  
Address: 841 EAST 18TH ST.  
City-St-Zip: HIALEAH, FL 33013

Title: MGR ( ) Delete  
Name: ROMO, MERCEDES  
Address: 841 EAST 18TH ST.  
City-St-Zip: HIALEAH, FL 33013

Title: MGR ( ) Delete  
Name: ROMO, JENNIFER  
Address: 841 EAST 18TH ST.  
City-St-Zip: HIALEAH, FL 33013

**ADDITIONS/CHANGES:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ELOY ROMO

P

02/25/2009

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