

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000020525

FILED
Jan 20, 2009
Secretary of State

Entity Name: CABALLERO & CASTELLANOS, P.L.

Current Principal Place of Business:

4649 PONCE DE LEON BLVD.
SUITE 404
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4649 PONCE DE LEON BLVD.
SUITE 404
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-0912942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABALLERO, NESTOR
4649 PONCE DE LEON BLVD.
SUITE 404
CORAL GABLES, FL 33146 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: CABALLERO, NESTOR
Address: 4649 PONCE DE LEON BLVD. SUITE 404
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: CASTELLANOS, ELIAS
Address: 4649 PONCE DE LEON BLVD. SUITE 404
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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: NESTOR CABALLERO

MGR

01/20/2009

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