

FILED
Feb 15, 2007 8:00 am
Secretary of State

02-15-2007 90273 007 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000022073

1. Entity Name
ACQUA 1502, L.L.C.



60015694

Principal Place of Business
**10143 E. BAY HARBOR DR. 9-A
BAY HARBOR, FL 33154**

Mailing Address
**10143 E. BAY HARBOR DR. 9-A
BAY HARBOR, FL 33154**

2. Principal Place of Business - No P.O. Box #
17875 Collins Avenue

3. Mailing Address
17875 Collins Avenue

State, Apt. #, etc.
Apt. 1502

State, Apt. #, etc.
Apt. 1502

02062007 Chg-LLC CR2E083 (12/06)

City & State
Sunny Isles, Beach, FL.

City & State
Sunny Isles, Beach, FL.

4. FEI Number
20-0931278

Applied For
Not Applicable

Zip
33160

Country
USA

Zip
33160

Country
USA

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FIGUEROA, JUAN A PA, CPA
1428 BRICKELL AVENUE, SUITE 206
MIAMI, FL 33131**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
HAMUI, ESTRELLA
19111 COLLINS AVENUE, APT. 2402
SUNNY ISLES BEACH, FL 33160** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR.
Hamui Estrella
17875 Collins Avenue, Apt. 1502
Sunny Isles Beach, FL 33160** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
ALFONSO ENTEBI HAMUI
19111 COLLINS AVENUE, APT. 2402
SUNNY ISLES BEACH, FL 33160** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
Alfonso. Entebi Hamui
17875 Collins Avenue, Apt. 1502
Sunny Isles Beach, FL 33160** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ Change ☐ Addition

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: *Alfonso Entebi Hamui*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

02-12-07

DATE

305 495 7276

DAYTIME PHONE #