2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023460

Entity Name: INTERLONJA, LLC

FILED Feb 15, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:	
10380 NW 10TH STREET PLANTATION, FL 33322		3325 SO. UNIVERSITY DRIVE 108 DAVIE, FL 33328	
Current Mailing Address:		New Mailing Address:	
10380 NW 10TH STREET PLANTATION, FL 33322		3325 SO. UNIVERSITY DRIVE 108 DAVIE, FL 33328	
FEI Number	: FEI Number Applied For (X)	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:	
The above	/ 10TH ST ION, FL 33322 US	purpose of changing its registered office or registered agent, or both	
SIGNATUI			
0.014/ (1.01	Electronic Signature of Registered Ag	pent Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete ROBLES, MAGDA L 10380 NW 10TH STREET PLANTATION, FL 33322	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	MGR () Delete DIAZ, LUZ M 10380 NW 10TH ST PLANTATION, FL 33322	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	MGR () Delete DIAZ, RUBY S 10380 NW 10TH STREET PLANTATION, FL 33322	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	() Delete	Title: MGR () Change (X) Addition Name: DIAZ, ELIZABETH Address: 10380 NW 10TH STREET City-St-Zip: PLANTATION, FL 33322	
Title: Name: Address: Citv-St-Zip:	() Delete	Title: MGR () Change (X) Addition Name: DIAZ, MARIA T Address: 10380 NW 10TH STREET City-St-Zip: PLANTATION, FL 33322	

I hereby certify that the information supplied with this filing does not qualify for the 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: MAGDA ROBLES MGRM 02/15/2007