

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024944

FILED
Jan 08, 2009
Secretary of State

Entity Name: ALLIANCE RECOVERY SYSTEMS, LLC

Current Principal Place of Business:

1727 SW 136TH PL
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

1727 SW 136TH PL
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-0943569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF ANDREU, PALMA & ANDREU, PL
701 SW 27TH AVENUE
STE. 900
MIAMI, FL 33135 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: ANDREU, JUAN G JR.
Address: 701 SW 27TH AVENUE, STE. 900
City-St-Zip: MIAMI, FL 33135 US

Title: MGRM () Delete
Name: ANDREU, JUAN G SR.
Address: 1094 SW 135TH COURT
City-St-Zip: MIAMI, FL 33184 US

Title: MGRM () Delete
Name: CADRECHA, CHARLES
Address: 701 SW 27TH AVENUE, STE. 900
City-St-Zip: MIAMI, FL 33135 US

Title: MGRM () Delete
Name: FREED, MICHAEL
Address: 12512 NW 10TH COURT
City-St-Zip: FT. LAUDERDALE, FL 33323

Title: MGRM () Delete
Name: LONGA, PABLO
Address: 7928 WEST DRIVE, APT. 603
City-St-Zip: NORTH BAY VILLAGE, FL 33141

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:

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: JUAN G. ANDREU

MGRM

01/08/2009

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