

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029171

Entity Name: MAXDU PROPERTIES, LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

18530 SW 52ND ST
MIRAMAR, FL 33029 US

New Principal Place of Business:

10881 NE 122ND ST
MEDLEY, FL 33178 US

Current Mailing Address:

18530 SW 52ND ST
MIRAMAR, FL 33029 US

New Mailing Address:

10881 NE 122ND ST
MEDLEY, FL 33178 US

FEI Number: 20-1011166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREIRA, JOSE EDUARDO
18530 SW 52ND ST
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

PEREIRA, JOSE EDUARDO
10881 NW 122ND ST
MEDLEY, FL 33178 US

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:

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PEREIRA, JOSE EDUARDO
Address: 18530 SW 52ND ST
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGRM () Delete
Name: TIAGO, MARCIA
Address: 18530 SW 52ND ST
City-St-Zip: MIRAMAR, FL 33029 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PEREIRA, JOSE EDUARDO
Address: 10881 NW 122ND ST
City-St-Zip: MEDLEY, FL 33178 US

Title: MGRM (X) Change () Addition
Name: TIAGO, MARCIA
Address: 10881 NW 122ND ST
City-St-Zip: MEDLEY, FL 33178 US

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: JOSE EDUARDO PEREIRA

MGRM

04/28/2008

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