

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L04000030199

1. Entity Name
VEP HOUSING DEVELOPERS, LLC



Principal Place of Business
1865 NORTH CORPORATE LAKES BLVD
STE - 1
WESTON, FL 33326

Mailing Address
1865 NORTH CORPORATE LAKES BLVD
STE - 1
WESTON, FL 33326



01292008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1012842

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESTE, ROMMEL
1865 NORTH CORPORATE LAKES BLVD
STE-1
WESTON, FL 33326

**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PIAR, CARLOS S
STREET ADDRESS	1865 NORTH CORPORATE LAKES BLVD, #1
CITY- ST- ZIP	WESTON, FL 33326
TITLE	MGR
NAME	ESTE, ROMMEL
STREET ADDRESS	1865 NORTH CORPORATE LAKES BLVD, #1
CITY- ST- ZIP	WESTON, FL 33326
TITLE	MGR
NAME	VIGOA, LUIS S
STREET ADDRESS	1865 NORTH CORPORATE LAKES BLVD, #1
CITY- ST- ZIP	WESTON, FL 33326
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U000000861818
04/03/08-80024-010 138.75

**DO NOT WRITE
IN THIS SPACE**

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: *[Signature]*

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

2/28/08

Date

Daytime Phone #