

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033064

Entity Name: ROSALBA, LLC

FILED  
Feb 09, 2009  
Secretary of State

**Current Principal Place of Business:**

169 NW 36TH STREET #1  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

410 NW 35TH STREET #1  
MIAMI, FL 33127

**New Mailing Address:**

FEI Number: 03-0542222

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORRE DE ALBA, ALBERTO  
410 NW 35TH STREET #1  
MIAMI, FL 33127 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: TORRE DE ALBA, ALBERTO  
Address: 410 N. W. 35 ST. APT. 1  
City-St-Zip: MIAMI, FL 33127

Title: MGRM ( ) Delete  
Name: PUGLIESE, ROSARIA  
Address: 151 CRANDON BLVD., #234  
City-St-Zip: KEY BISCAVNE, FL 33149

**ADDITIONS/CHANGES:**

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: ALBERTO TORRE DE ALBA

MGR

02/09/2009

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