

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033439

Entity Name: AB91 ENTERPRISES, LLC

FILED  
May 07, 2007  
Secretary of State

## Current Principal Place of Business:

11265 SW 53 TERRACE  
MIAMI, FL 33165

## New Principal Place of Business:

## Current Mailing Address:

11265 SW 53 TERRACE  
MIAMI, FL 33165

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

LOPEZ, MADAY  
8311 SW 38TH STREET  
MIAMI, FL 33155 US

## Name and Address of New Registered Agent:

BUENO, LUCILA  
11265 SW 53 TERRACE  
MIAMI, FL 33165 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: LUCILA BUENO

05/07/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: LOPEZ, MADAY  
Address: 11265 SW 53 TERRACE  
City-St-Zip: MIAMI, FL 33165

Title: MGR (X) Delete  
Name: BUENO, LUCILA  
Address: 11265 SW 53 TERRACE  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BUENO, LUCILA  
Address: 11265 SW 53 TERRACE  
City-St-Zip: MIAMI, FL 33165

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: LUCILA BUENO

MGR

05/07/2007

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