2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000037716

1. Entity Name
TONY ORELLANA LLC



FILED Apr 14, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3009 NW 5TH ST

POMPANO BEACH, FL 33069

3009 NW 5TH ST POMPANO BEACH, FL 33069



04022008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1139599 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ORELLANA, TONY E 3009 NW 5TH ST POMPANO BEACH, FL 33069

SIGNATURE:

DO NOT WRITE IN THIS SPACE

 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. (NC	OTE: Registered Agent signature required when reinstating)	DATE
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ORELLANA, TONY E 3009 NW 5TH ST POMPANO BEACH, FL 33069		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			100000898219 15/08-80079-013 143.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS	,		

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.