

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039695

FILED
Apr 27, 2009
Secretary of State

Entity Name: CARLOS FORERO ENTERPRISE, LLC

Current Principal Place of Business:

644 CASCADE FALLS DR
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

5220 S. UNIVERSITY DR.
SUITE C-102
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-1164101 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SILVA'S ENTERPRISE INC.
5220 S. UNIVERSITY DR.
SUITE C-102
DAVIE, FL 33328 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: MGR () Delete
Name: FORERO, CARLOS
Address: 644 CASCADE FALLS DR
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

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: CARLOS FORERO MGR 04/27/2009

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