

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052122

Entity Name: FINE ENCLOSURES, LLC

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

P.O. BOX 812302
BOCA RATON, FL 334812302

New Principal Place of Business:

4260 OAK CRICLE
BOCA RATON, FL 33431 PB

Current Mailing Address:

P.O. BOX 812302
BOCA RATON, FL 334812302

New Mailing Address:

P.O. BOX 812302
BOCA RATON, FL 334812302 PB

FEI Number: 34-2005276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANN & WOLF, LLP
55 NE 5TH AVE
SUITE 500
BOCA RATON, FL 33432 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: CEO () Delete
Name: PEREZ DE LARA, BERNARDO
Address: PO BOX 812302
City-St-Zip: BOCA RATON, FL 33481 US

Title: VP () Delete
Name: ARIAS, ESTEBAN
Address: WORLD TRADE CENTER 50 PISO - SUITE 29
City-St-Zip: MEXICO, DF 03810 MX

Title: CMO () Delete
Name: PEREZ DE LARA, MONICA
Address: PO BOX 812302
City-St-Zip: BOCA RATON, FL 33481 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BERNARDO PEREZ DE LARA

CEO

04/01/2008

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