

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000053466

**FILED
Oct 03, 2007
Secretary of State****Entity Name:** OTALORA CONSTRUCTION SOLUTIONS, L.L.C.**Current Principal Place of Business:**7321 SW 109 COURT
MIAMI, FL 33173**New Principal Place of Business:****Current Mailing Address:**7321 SW 109 COURT
MIAMI, FL 33173**New Mailing Address:**

FEI Number: 90-0231648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:OTALORA, MARIO O
7321 SW 109 COURT
MIAMI, FL 33173 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: OTALORA, MARIO O
Address: 7321 SW 109 COURT
City-St-Zip: MIAMI, FL 33173Title: MGR () Delete
Name: OTALORA, MONICA M
Address: 7321 SW 109 COURT
City-St-Zip: MIAMI, FL 33173Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:**Title: P (X) Change () Addition
Name: OTALORA, MARIO O
Address: 7321 SW 109 COURT
City-St-Zip: MIAMI, FL 33173Title: VP (X) Change () Addition
Name: OTALORA, MONICA M
Address: 7321 SW 109 COURT
City-St-Zip: MIAMI, FL 33173Title: D () Change (X) Addition
Name: SALAZAR, FRANCISCO
Address: 8075 NW 7TH STREET #504
City-St-Zip: MIAMI, FL 33126

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: MARIO OTOROLA

P

10/03/2007

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