

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053713

FILED
Apr 07, 2008
Secretary of State

Entity Name: MURCIA INVESTMENTS, LLC

Current Principal Place of Business:

11421 S.W. 25TH COURT
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

C/O NOEL S MURICA, MM
9525 FAIRMOUNT RD
NOVELTY, OH 44072

New Mailing Address:

FEI Number: 20-1783880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURCIA, J. SALVADOR
11421 S.W. 25TH COURT
DAVIE, FL 33325 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: MGRM () Delete
Name: MURCIA, NOEL S
Address: 9525 FAIRMOUNT RD
City-St-Zip: NOVELTY, OH 44072

Title: MGRM () Delete
Name: MURCIA, CRYSTAL L
Address: 9525 FAIRMOUNT RD
City-St-Zip: NOVELTY, OH 44072

Title: MGRM () Delete
Name: MURCIA, J. SALVADOR
Address: 11421 S.W. 25TH COURT
City-St-Zip: DAVIE, FL 33325

Title: MGRM () Delete
Name: MURCIA, S. JO
Address: 11421 S.W. 25TH COURT
City-St-Zip: DAVIE, FL 33325

Title: MGRM () Delete
Name: SMITH, BARBARA J
Address: P.O. BOX 166
City-St-Zip: MENTONE, IN 46539

Title: MGRM () Delete
Name: SMITH, ROBERT C
Address: P.O. BOX 166
City-St-Zip: MENTONE, IN 46539

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:

Title: () Change () Addition
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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: NOEL S. MURCIA

MGRM

04/07/2008

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