2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 02, 2008 8:00 am Secretary of State

			1 Secretary of State	
DOCUMENT # L04000056648 1. Entity Name PISA MANAGEMENT COMPANY LLC				90154 028 ***138.75
			-{	
Principal Place of Business	Mailing Address			
4930 PALM AVE. P O BOX 402566				
HIALEAH, FL 33012 MIAMI BEACH, FL 33140				
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				<u> </u>
2. Principal Place of Bushess - Na P.O. Boy # 3. Mailing Address		A = 1 A		
3233 Malun Har 74 P/ P.O. Box 4025		<i>3</i> 566		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		01232008 Chg-LLC	CR2E083 (12/06)
			5.1g 22.0	0.02000 (1200)
City & State City & State		2	4. FEI Number	Applied For
HIGIEUM 1	Miamile	elus	20-1437379	Not Applicable
zin732012 Country A	33/Y0	ESHAY	5. Certificate of Status Desired	55.00 Additional
3501L USIO	33140	011	<u></u>	Fee Required
6. Name and Address of Curren	it Registered Agent		7. Name and Address of New R	legistered Agent
		Name	Name	
GARCIA, JOSE M		Street Address (P.O. Box Number Is Not Acceptable)		
4930 PALM AVE. 🦠 🐇		Street Address	(F.O. Box Number is Not Acceptable	*)
HIALEAH, FL 33012			·	
/	7 /			
		City		FL Zip Code
The above named entity submits this statement the obligations of registered agent.	for the purpose or changing its	registered office or registe	ered agent, or both, in the State of Fix	orida. I am tamiliar with, and accept
the doingalions of registered again.	<i>//</i>		1	•
SIGNATURE	$\overline{}$			
Signature, lyped to printed name of edisored ago	erand title if applicable. (NOT	E: Registered Agent signature require	id when reinstating)	DATE
		•	Sanata Sanata	A CONTROL OF A CON
FILE NOWIIL FEE IS \$138.75	1 /	,	Mak	e check payable to
After May 1, 2008 Fee will be \$538.7	75 / ·		جن بن Florida ا	a Department of State
				Section 1
	BERS MANAGERS	10.	ADDITIONS	/CHANGES
TITLE MGR	☐ Delete	TITLE		☐ Change ☐ Addition
NAME GARCIA, JÖSE M	•	NAME		
STREET ADDRESS 3158 BAY ROAD		STREET ADDRESS		
CITY-ST-ZIP MIAMI BEACH, FL 33140		CITY-ST-ZIP		
TITLE MGR	Defete	TITLE		☐ Change ☐ Addition
NAME GARCIA, ISABEL	_ 53335	NAME		
STREET ADDRESS 3158 BAY ROAD		STREET ADDRESS		
CITY-ST-ZIP MIAMI BEACH, FL 33140		CITY-ST-ZIP	•	ı
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TITLE	☐ Delete	TITLE	•	☐ Change ☐ Addition
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STREET ADDRESS	~ •	STREET ADDRESS		I
CITY-ST-ZIP		CITY-ST-ZIP		
11. I hereby certify that the information supplied with this fling 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 repelver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				
1 -long				
2/18/08 201 GIA 2494 1				
SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Date Description of the proper of the prop				
SIGNATURE AND TYPED OR PRINTED NAME	. OF SIGNING MANAGING MEMBER, MA	NAGER, UK AUTHORIZED REPRES	SENTATIVE Date	Daytime Phone #