

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057194

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: MICELLI 213 INVESTMENT LLC

## Current Principal Place of Business:

9737 NW 41 ST  
#615  
MIAMI, FL 33178 US

## New Principal Place of Business:

## Current Mailing Address:

9737 NW 41 ST  
#615  
MIAMI, FL 33178 US

## New Mailing Address:

10520 NW 26TH ST.  
#C 201  
DORAL, FL 33172 US

FEI Number: 20-1444206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CABANAS & ASSOCIATES, P.A.  
10520 NW 26 ST.  
SUITE C 201  
DORAL, FL 33172 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: MICELLI, ALDO  
Address: 10720 NW 66 ST - #213  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM ( ) Delete  
Name: DE MICELLI, MARIA M  
Address: 10720 NW 66 ST - #213  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM ( ) Delete  
Name: MICELLI, EURO  
Address: 10720 NW 66 ST - #213  
City-St-Zip: DORAL, FL 33178 US

Title: MGRM ( ) Delete  
Name: MICELLI, HECTOR I  
Address: 10720 NW 66 ST - #213  
City-St-Zip: DORAL, FL 33178 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:

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: ALDO MICELLI

MGRM

04/08/2008

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