

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057621

Entity Name: RESUNSA L.L.C.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

11421 SW 25 COURT
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

11421 SW 25 COURT
DAVIE, FL 33325

New Mailing Address:

FEI Number: 76-0818278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURCIA, JULIO S
11421 SW 25 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, J. SALVADOR
Address: 11421 SW 25TH COURT
City-St-Zip: DAVIE, FL 33325

Title: MGRM (X) Delete
Name: GONZALEZ, JOHN C
Address: 9243 NW 18TH ST
City-St-Zip: PLANTATION, FL 33322

Title: MGRM (X) Delete
Name: WHYTE, MAX B
Address: 5640 ALLEN ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR (X) Delete
Name: MURCIA, SALLY J
Address: 11421 SW 25TH COURT
City-St-Zip: DAVIE, FL 33325

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: J SALVADOR MURCIA

MGRM

01/14/2009

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