


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**


**DOCUMENT # L04000061820**

1. Entity Name  
**ARC & CHILDREN INVESTMENTS, LLC**



Principal Place of Business <b>3651 NW 79 AVE          MIAMI, FL 33166</b>	Mailing Address <b>3651 NW 79 AVE          MIAMI, FL 33166</b>
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**DO NOT WRITE IN THIS SPACE**



01042007No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>20-1527991</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CAJIGAS, RICARDO  
 3651 NW 79 AVENUE  
 MIAMI, FL 33166**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* Ricardo Cajigas      DATE: 2/23/07

Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered agent signature required when reinstating)      DATE

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CAJIGAS, RICARDO 8030 LOS PINOS CIRCLE CORAL GABLES, FL 33143
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CAJIGAS, ALEIDA 8030 LOS PINOS CIRCLE CORAL GABLES, FL 33143
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 05/11/07-80060-019 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* Ricardo Cajigas      Date: 2/23/07      Daytime Phone #: 305-599-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #