

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062109

FILED
Apr 30, 2009
Secretary of State

Entity Name: DAVIE BOULEVARD GAS LLC

Current Principal Place of Business:

1260 N.W. 74 STREET
MIAMI, FL 33147

New Principal Place of Business:

2401 NW 30 AV
MIAMI, FL 33142

Current Mailing Address:

1260 N.W. 74 STREET
MIAMI, FL 33147

New Mailing Address:

2401 NW 30 AV
MIAMI, FL 33142

FEI Number: 20-2046627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AYALA, MARTHA I
1260 N.W. 74 STREET
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

AYALA, MARTHA I
2401 NW 30 AV
MIAMI, FL 33142 US

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:

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AYALA, MARTHA
Address: 1260 N.W. 74 STREET
City-St-Zip: MIAMI, FL 33147

Title: MGR () Delete
Name: GONZALEZ, RUBEN
Address: 1260 N.W. 74 STREET
City-St-Zip: MIAMI, FL 33147

Title: MGR () Delete
Name: ARIF, MOHAMED
Address: 1260 N.W. 74 STREET
City-St-Zip: MIAMI, FL 33147

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:

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: MARTHA I. AYALA

MGRM

04/30/2009

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