2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# L04000072830

Entity Name: ALONDRA HOME HELP LLC

Current Principal Place of Business:

13780 SW 26TH ST, STE 208
MIAMI, FL 33175

New Principal Place of Business:

13780 SW 26TH ST
STE 208
MIAMI, FL 33175

Current Mailing Address:

13780 SW 26TH ST, STE 208
MIAMI, FL 33175

New Mailing Address:

13780 SW 26TH ST
STE 208
MIAMI, FL 33175

FEI Number: 20-1747988 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORALES, JUAN
11800 S.W. 18TH STREET, #425
MIAMI, FL 33175 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: MORALES, JUAN
Address: 11800 S.W. 18TH STREET, #425
City-St-Zip: MIAMI, FL 33175

Title: MGRM ( ) Delete
Name: MORALES, YOAMA
Address: 11800 S.W. 18TH STREET, #425
City-St-Zip: MIAMI, FL 33175

Title: MGRM ( ) Delete
Name: SAMPEIRO, ENRIQUE
Address: 11800 S.W. 18TH STREET, #425
City-St-Zip: MIAMI, FL 33175

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: JUAN MORALES PRES 02/04/2009

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