# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 06, 2009**
**Secretary of State**

DOCUMENT# L04000074470

**Entity Name:** CROMBET, LLC

**Current Principal Place of Business:**

C/O RAMON A. RODRIGUEZ
350 EAST LAS OLAS BLVD., SUITE 1420
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

CINDY BEST
6682 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

C/O RAMON A. RODRIGUEZ
350 EAST LAS OLAS BLVD., SUITE 1420
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

CINDY BEST
6682 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309

**FEI Number: 20-1765078** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RODRIGUEZ, RAMON A
350 EAST LAS OLAS BLVD., SUITE 1420
FT. LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

RODRIGUEZ, RAMON A
6682 NW 16TH TERRACE
FORT LAUDERDALE, FL 33309 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: RAMON A. RODRIGUEZ 02/06/2009
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete
Name: RODRIGUEZ, RAMON A
Address: 350 E. LAS OLAS BLVD., #1420
City-St-Zip: FORT LAUDERDALE, FL 33301

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition
Name: RODRIGUEZ, RAMON A
Address: 6682 NW 16TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33309

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: RAMON A. RODRIGUEZ MGR 02/06/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date