

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000075753	
1. Entity Name ARGUELLES HOLDINGS, LLC	
Principal Place of Business 2731 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134 US	Mailing Address 2731 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134 US



FILED
Jul 22, 2008 08:00 AM
Secretary of State



07152008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2154809	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ARGUELLES, MARIA V
2731 PONCE DE LEON BOULEVARD
CORAL GABLES, FL 33134

**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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

000000355993
07/22/08-80014-003 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ARGUELLES, MARIA V
STREET ADDRESS	2731 PONCE DE LEON BOULEVARD
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Maria V. Arguelles* **MARIA V. ARGUELLES** *7/15/08* **305-444-8007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #