## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

· . V

## FILED Jan 22, 2008 8:00 am Secretary of State

Date

Daytime Phone #

DOCUMENT #10400000000				¬ .	Secretary of State			
DOCU 1. Entity Nam SINEP, L		630				16 022 ***138.7		
Principal Plac	e of Business	Mailing Address		עטעי 🏻	<b>v</b>			
10420 SW 4		10420 SW 40 STREET						
MIAMI, FL 3		MIAMI, FL 33165						
Milrion, I E J	3103	MINIM, IL 33103						
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2. Principal P	Place of Bysiness) - No P.O. Boy	3. Mailing Address 404 MW	107 Path					
Suite, Apt.	4. etc	Suite, Apt. #, etc.		01142008	Chg-LLC	CR2E083 (12/06)		
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<u> </u>	my FC	MIGINI	<del></del>	20-189	11912		Applicable	
チュネ	RIQA Country	Pazióa	Country	5. Certificate	of Status Desired	□ \$5.00 Addit	ional	
<u> </u>	779	30/93				Fee Required		
	6. Name and Address of Current F	Registered Agent		7. Name and	Address of New Reg	istered Agent		
			Name	orres	Kinn	Ma H.		
	S, SERGIO N		Street Address		er is Not Acceptable)	00/		
	40 STREET		Street Address	S (P.O. BOX NUMB	er is Not wcceptable)			
MIAMI, FL	33165		12.11	1 /4	03	11 40		
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- <u>-</u> -		<del> </del>	$\mathcal{A}$	10/11/		1- 00	<u> 99 </u>	
	named entity submits this statement for	the purpose of changing its r	egistered office or regis	tered agent, or bo	oth, in the State of Florid	la. I am familiar with, a	nd accept	
the obligations of registered agent								
SIGNATURE .								
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature requi	irea when reinstating)		DATE		
	1	<u> </u>		ļ				
FILE	NOWIII FEE IS \$138.75			İ	Make o	check payable to		
After May	/ 1, 2008 Fee will be \$538.75	1		į	Florida D	epartment of State		
9.	MANAGING MEMBER	RS/MANAGE <b>RS</b>	10.		ADDITIONS/CH	HANGES		
TITLE	MGR	Delete	TITLE			Change	☐ Addition	
		A DOICE	1 1111					
NAME	MENESES, SERGIO N	X	NAME					
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