

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 15, 2007 8:00 am
Secretary of State

04-23-2007 90378 030 ****50.00

DOCUMENT # L05000008344 1. Entity Name RIGO PROPERTY MANAGEMENT, LLC	
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Principal Place of Business 1351 N. GOLDENROD RD. STE. 8 ORLANDO, FL 32807	Mailing Address 1351 N. GOLDENROD RD. STE. 8 ORLANDO, FL 32807
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DO NOT WRITE IN THIS SPACE

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02282007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2228456	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

CABRERA, RIGOBERTO
2926 SUMMER SWAM DR.
ORLANDO, FL 32825

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CABRERA, RIGOBERTO 2926 SUMMER SWAM DR. ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RIGO TILE & MARBLE EXPERTS, INC. 5121 E. COLONIAL DR., STE C ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP INGRID, PEREZ G 2926 SUMMER SWAM DR. ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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.

Ingrid Garcia *Ingrid G. Perez*
SIGNATURE: *Rigoberto Cabrera* 4/20/07 407-277-7977

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #