

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017941

Entity Name: CINCO S, LLC

FILED  
Jan 30, 2007  
Secretary of State

**Current Principal Place of Business:**

1870 NE 197 TERRACE  
NORTH MIAMI BEACH, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

1870 NE 197 TERRACE  
NORTH MIAMI BEACH, FL 33179

**New Mailing Address:**

FEI Number: 20-2397270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALBERT, SAMUEL  
1870 NE 197 TERRACE  
NORTH MIAM BEACH, FL 33179 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: MGR ( ) Delete  
Name: WAGEMBERG, SAUL  
Address: 20281 EAST COUNTRY CLUB DR. # PH-8  
City-St-Zip: AVENTURA, FL 33180 US

Title: MGR ( ) Delete  
Name: YANOVICH, SAUL  
Address: 8039 COBBLECREEK CIRCLE  
City-St-Zip: POTOMAC, MD 20854

**ADDITIONS/CHANGES:**

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 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: SAMUEL ALBERT

VP

01/30/2007

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