

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2008 8:00 am
Secretary of State

01-14-2008 90050 015 ***138.75

60001306



DOCUMENT # L05000026048 1. Entity Name ESCAPIRO DEVELOPMENT, LLC																													
Principal Place of Business 4850 SW 72 AVENUE MIAMI, FL 33155			Mailing Address 4850 SW 72 AVENUE MIAMI, FL 33155																										
2. Principal Place of Business - No P.O. Box # 9840 SW 77th Ave		3. Mailing Address 9840 SW 77th Ave																											
Suite, Apt. #, etc. 301		Suite, Apt. #, etc. 301																											
City & State Miami, FL		City & State Miami, FL																											
Zip 33154	Country USA	Zip 33154	Country USA	4. FEI Number 59-3801540																									
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent CERVANTES, PATRICIO 4850 SW 72 AVENUE MIAMI, FL 33155			7. Name and Address of New Registered Agent Name Cervantes, Patricio Street Address (P.O. Box Number is Not Acceptable) 9840 SW 77th Ave Suite 301 City Miami FL Zip Code 33154																										
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 <u><i>P. Cervantes</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____																													
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">MGR</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CERVANTES, PATRICIO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4850 SW 72 AVENUE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>MIAMI, FL 33155</td> <td></td> </tr> </table>			TITLE	MGR	<input checked="" type="checkbox"/> Delete	NAME	CERVANTES, PATRICIO		STREET ADDRESS	4850 SW 72 AVENUE		CITY - ST - ZIP	MIAMI, FL 33155		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 60%;">MGR</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Cervantes, Patricio</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9840 SW 77th Ave, #301</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Miami, FL 33154</td> <td></td> </tr> </table>			TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Cervantes, Patricio		STREET ADDRESS	9840 SW 77th Ave, #301		CITY - ST - ZIP	Miami, FL 33154	
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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: <u><i>P. Cervantes</i></u>																													
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date _____ Daytime Phone # _____																									