

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2006 8:00 am
Secretary of State

03-31-2006 90183 001 ****50.00

DOCUMENT # L05000029319

1. Entity Name
5511, L.L.C.



Principal Place of Business

~~6494 CORAL WAY~~
~~MIAMI, FL 33155~~

Mailing Address

~~6494 CORAL WAY~~
~~MIAMI, FL 33155~~

20023324

2. Principal Place of Business

5511 SW 8 ST

Suite, Apt. #, etc.

3. Mailing Address

5511 SW 8 ST

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

20-261118

Applied For

Not Applicable

Zip
33134

Country
U.S.

Zip
33134

Country
U.S.

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~FERNANDEZ, JULIO A~~
~~6494 CORAL WAY~~
~~MIAMI, FL 33155~~

7. Name and Address of New Registered Agent

Name JULIO A. FERNANDEZ

Street Address (P.O. Box Number is Not Acceptable)

5511 SW 8 ST.

City MIAMI

FL Zip Code 33134

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

Julio Fernandez

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

(NOTE: Registered Agent signature required when reinstating)

03/24/06

DATE

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME PEREZ, JORGE L
STREET ADDRESS 6494 CORAL WAY
CITY-ST-ZIP MIAMI, FL 33155

TITLE MGRM ☐ Delete
NAME FERNANDEZ, JULIO A
STREET ADDRESS 6494 CORAL WAY
CITY-ST-ZIP MIAMI, FL 33155

TITLE MGRM ☐ Delete
NAME HARRIS, GEOFFREY D
STREET ADDRESS 6494 CORAL WAY
CITY-ST-ZIP MIAMI, FL 33155

TITLE MGRM ☐ Delete
NAME ESPINOSA, MIGUEL
STREET ADDRESS 6494 CORAL WAY
CITY-ST-ZIP MIAMI, FL 33155

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM (ALL 4): ☒ Change ☐ Addition
NAME JORGE L. PEREZ
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME JULIO A. FERNANDEZ
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME GEOFFREY D. HARRIS
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME ALL 4 @:
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Julio Fernandez

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

03/24/06

Date

Daytime Phone #