

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90095 040 ***138.75

DOCUMENT # L05000029319	
1. Entity Name 5511, L.L.C.	

Principal Place of Business 5511 SOUTHWEST 8 STREET MIAMI FL 33134 US	Mailing Address 5511 SOUTHWEST 8 STREET MIAMI FL 33134 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E083 (10/07)

4. FEI Number 20-2611118	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FERNANDEZ, JULIO A 5511 SOUTHWEST 8 STREET # 202 MIAMI FL 33134	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____
Signature typed or printed name of registered agent and fee form state (NOTE: Registered Agent's signature is required when changing) 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				10. ADDITIONS / CHANGES			
TITLE	MGRM	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	PEREZ, JORGE L			NAME			
STREET ADDRESS	5511 SOUTHWEST 8 STREET			STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134			CITY-ST-ZIP			
TITLE	MGRM	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	FERNANDEZ, JULIO A			NAME			
STREET ADDRESS	5511 SOUTHWEST 8 STREET			STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134			CITY-ST-ZIP			
TITLE	MGRM	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	HARRIS, GEOFFREY D			NAME			
STREET ADDRESS	5511 SOUTHWEST 8 STREET			STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134			CITY-ST-ZIP			
TITLE	MGRM	☐ Delete		TITLE		☐ Change ☐ Addition	
NAME	ESPINOSA, MIGUEL			NAME			
STREET ADDRESS	5511 SOUTHWEST 8 STREET			STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134			CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐ Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐ Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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** 1-24-08 (305) 740-3319
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Expiring Period