


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000029941	
1. Entity Name SM, LLC	

Principal Place of Business 19333 COLLINS AVENUE APARTMENT 1410 MIAMI, FL 33160	Mailing Address 19333 COLLINS AVENUE APARTMENT 1410 SUNNY ISLES MIAMI, FL 33160
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04082007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3188766	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BLAXBERG, GRAYSON, KUKOFF & SEGAL, P.A.
25 SE 2ND AVENUE
SUITE 730
MIAMI, FL 33131

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

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

U000000700544
04/20/07-80022-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BITON, JAIME 1 RODRIGUEZ SERRA CONDO OLYMPIC TOWERS 201 SAN JUAN, PR 00907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MENDA, RAFAEL 19333 COLLINS AVENUE, APT. 1410 SUNNY ISLES, FL 33160
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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: RAFAEL MENDA 4-9-2007 305-932-5027

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