## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L05000030621** 

1. Entity Name

BELÉN'S CLOSING SERVICES, LLC



FILED Jan 14, 2008 08:00 A Secretary of State

Principal Place of Business

733 NORTHEAST SECOND STREET POMPANO BEACH, FL 33060 US

Mailing Address

733 NORTHEAST SECOND STREET POMPANO BEACH, FL 33060 U



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 81-0672224 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, BELEN 733 NORTHEAST SECOND STREET POMPANO BEACH, FL 33060

## DO NOT WRITE IN THIS SPACE

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 lamiliar with, and accept
	the obligations of registered agent.	

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

## FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGR SANCHEZ, BELEN 733 NORTHEAST SECOND STREET POMPANO BEACH, FL 33060	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000782727 01/45/08=80062=009 143.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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 accumate 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:

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

1/9/08

954-817-5766

Daytime Phone #