

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033796

FILED  
May 01, 2007  
Secretary of State

Entity Name: AXIS UNIT 3420, LLC.

**Current Principal Place of Business:**

15711 SW 91ST STREET  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

15711 SW 91ST STREET  
MIAMI, FL 33196

**New Mailing Address:**

FEI Number: 20-2648862      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FERNANDEZ, YOLANDA  
15711 SW 91ST STREET  
MIAMI, FL 33196      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: FERNANDEZ, YOLANDA  
Address: 15711 SW 91ST STREET  
City-St-Zip: MIAMI, FL 33196

Title: MBR      ( ) Delete  
Name: CUSTODIO, DENIS  
Address: 15522 SW 41ST TER  
City-St-Zip: MIAMI, FL 33185

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      (X) Change ( ) Addition  
Name: CUSTODIO, DENIS  
Address: 15522 SW 41ST TER  
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: YOLANDA FERNANDEZ

MGR

05/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date