

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2008 8:00 am
Secretary of State

03-20-2008 90181 037 ***138.75

DOCUMENT # L05000036761

1. Entity Name
AA&A REAL ESTATE ASSOCIATES, LLC



Principal Place of Business
**1298 N. W. 10TH AVENUE
MIAMI, FL 33136**

Mailing Address
**1298 N. W. 10TH AVENUE
MIAMI, FL 33136**

60016064



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

56-2509596

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ZAMORA, ALEJANDRO A
1298 N.W. 10TH AVENUE
MIAMI, FL 33136**

7. Name and Address of New Registered Agent

Name **Alejandro A. Zamora**

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

1401 N.W. 17 AVENUE

City **Miami**

FL

Zip Code

33125

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

Alejandro A. Zamora

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

(NOTE: Registered Agent signature required when reinstating)

3-17-08

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

TITLE **MGR** ☐ Delete
NAME **ZAMORA, ALEJANDRO A**
STREET ADDRESS **1298 N. W. 10TH AVENUE**
CITY-ST-ZIP **MIAMI, FL 33136**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MANAGING MEMBER - MGR** ☒ Change ☐ Addition
NAME **Alejandro A. Zamora**
STREET ADDRESS **1401 N.W. 17 AVE.**
CITY-ST-ZIP **MIAMI, FL 33125**

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

TITLE ☐ Change ☐ Addition
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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:

Alejandro A. Zamora

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

3-17-08 (305) 324-4512

Date Daytime Phone #