2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2008
Secretary of State

DOCUMENT# L05000039289

Entity Name: CABALF INVESTMENT, LLC

Current Principal Place of Business:

6175 NW 153 STREET
SUITE 321
MIAMI LAKES, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

6175 NW 153 STREET
SUITE 321
MIAMI LAKES, FL 33014 US

New Mailing Address:

FEI Number: 25-1916279 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALFONSO, PABLO J
6175 NW 153 STREET
SUITE 321
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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:	ALFONSO, PABLO J	
Address:	6175 NW 153 STREET, SUITE 321	
City-St-Zip:	MIAMI LAKES, FL 33014 US	
Title:	MGR	( ) Delete
Name:	CABRERA, RUBEN	
Address:	6175 NW 153 STREET, SUITE 321	
City-St-Zip:	MIAMI LAKES, FL 33014 US	
Title:	MGR	( ) Delete
Name:	ALFONSO, TAMMY	
Address:	6175 NW 153 STREET, SUITE 321	
City-St-Zip:	MIAMI LAKES, FL 33014 US	

ADDITIONS/CHANGES:

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

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: PABLO J. ALFONSO MGRM 03/27/2008

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