## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000039289

City-St-Zip:

MIAMI LAKES, FL 33014 US

Entity Name: CABALF INVESTMENT, LLC

FILED Mar 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6175 NW 153 STREET SUITE 321 MIAMI LAKES, FL 33014 US **New Mailing Address: Current Mailing Address:** 6175 NW 153 STREET SUITE 321 MIAMI LAKES, FL 33014 US FEI Number: 25-1916279 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALFONSO, PABLO J 6175 NW 153 STREET SUITE 321 MIAMI LAKES, FL 33014 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete ALFONSO, PABLO J Name: Name: Address: 6175 NW 153 STREET, SUITE 321 Address: City-St-Zip: MIAMI LAKES, FL 33014 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: CABRERA, RUBEN Name: Address: 6175 NW 153 STREET, SUITE 321 Address: City-St-Zip: MIAMI LAKES, FL 33014 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition ALFONSO, TAMMY Name: Name: 6175 NW 153 STREET, SUITE 321 Address: Address:

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.

City-St-Zip:

SIGNATURE: PABLO J ALFONSO MGR 03/20/2009