

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043130

Entity Name: CARMAR, LLC.

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

8540 SW 87 AVENUE
MIAMI, FL 33173

New Principal Place of Business:

226 SOUTH KROME AVENUE
HOMESTEAD, FL 33030

Current Mailing Address:

8540 SW 87 AVENUE
MIAMI, FL 33173

New Mailing Address:

226 SOUTH KROME AVENUE
HOMESTEAD, FL 33030

FEI Number: 20-2777631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, CARLOS
8540 SW 87 AVENUE
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

MARTINEZ, CARLOS
226 SOUTH KROME AVENUE
HOMESTEAD, FL 33030 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: MGRM

04/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MARTINEZ, CARLOS
Address: 8540 SW 87 AVENUE
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: REDONDO, MARIA
Address: 8540 SW 87 AVENUE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MARTINEZ, CARLOS
Address: 12256 SW 116 LANE
City-St-Zip: MIAMI, FL 33186

Title: MGRM (X) Change () Addition
Name: REDONDO, MARIA
Address: 12256 SW 116 LANE
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS MARTINEZ

MGMR

04/09/2007

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