2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# L05000048694

Entity Name: ALEX ACOSTA LLC

Current Principal Place of Business:

3900 SW 139TH AVE
MIRAMAR, FL 33027 US

New Principal Place of Business:

Current Mailing Address:

3900 SW 139TH AVE
MIRAMAR, FL 33027

New Mailing Address:

3900 SW 139TH AVE
MIRAMAR, FL 33027 US

FEI Number: 20-3412014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ACOSTA, ALEX A
3900 SW 139TH AVE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

ACOSTA, RIGOBERTO A
3900 SW 139TH AVE
MIRAMAR, FL 33027 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: RIGOBERTO A. ACOSTA 01/08/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ACOSTA, ALEX A
Address: 3900 SW 139TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition
Name: ACOSTA, ISABEL M
Address: 3900 SW 139TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: MGR ( ) Change (X) Addition
Name: HARRISON, TATHAM M
Address: 3900 SW 139TH AVE
City-St-Zip: MIRAMAR, FL

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: ALEX A. ACOSTA MGMB 01/08/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date