


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000049116</b> 1. Entity Name 5301 SW 134 AVENUE, LLC	
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Principal Place of Business 8040 NW 155 STREET MIAMI LAKES, FL 33016	Mailing Address 8040 NW 155 STREET MIAMI LAKES, FL 33016
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**DO NOT WRITE IN THIS SPACE**



03282007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3475792	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
LAZO, FELIX P  
8040 NW 155 STREET  
MIAMI LAKES, FL., FL 33016

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature: typed or printed name of registered agent and title if applicable.


**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAZO, FELIX P 8040 NW 155 STREET MIAMI LAKES, FL 33016
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U000000713071  
04/26/07-80075-016 50.00

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:**  **4/9/07** **779-1098**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone