


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000055864**

1. Entity Name  
**YELLOW KEYS LLC**



Principal Place of Business <b>5402 W. FLAGLER STREET          MIAMI, FL 33134</b>	Mailing Address <b>5402 W. FLAGLER STREET          MIAMI, FL 33134</b>
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**DO NOT WRITE IN THIS SPACE**



02072008No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>20-3139275</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**PENA, RALPH JR.  
 5402 W. FLAGLER STREET  
 MIAMI, FL 33134**

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

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000824470  
 02/20/08-80080-011 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PENA, RALPH JR. 5402 W. FLAGLER STREET MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PENA, LUCIA C 5402 W. FLAGLER STREET MIAMI, FL 33134
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**DO NOT WRITE IN THIS SPACE**

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:** *Lucia Pena* **LUCIA C PENA, MANAGING MEMBER** **2-7-08** **305-804-5742**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #