


FILED

Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000056744

1. Entity Name
BAEZA PROPERTIES LLC



Principal Place of Business	Mailing Address
3693 NW 124TH AVE POMPAÑO BEACH, FL 33065 US	3693 NW 124TH AVE POMPAÑO BEACH, FL 33065 US

DO NOT WRITE IN THIS SPACE



03202007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2976105	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
BAEZA, SEAN C 3693 NW 124TH AVE POMPANO BEACH, FL 33065

**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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAEZA, SEAN C 3693 NW 124TH AVE CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAEZA, LAURA 3693 NW 124TH AVE CORAL SPRINGS, FL 33065
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04/09/07-80002-009 50.00

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

03-27-2007

Date _____

954-227-1733

Daytime Phone #