2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058994

Name:

Address:

City-St-Zip:

Entity Name: ANGEL ARROYO, LTD. CO.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7508 STILLRIDGE DR 4302 GUNN HIGHWAY 808 TAMPA, FL 33615 TAMPA, FL 33618 **New Mailing Address: Current Mailing Address:** 7508 STILLRIDGE DR 4302 GUNN HIGHWAY 808 TAMPA, FL 33618 TAMPA, FL 33615 FEI Number: 20-3002132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARROYO, ANGEL A SR ARROYO, ANGEL A SR 7508 STILLRIDGE DR 4302 GUNN HIGHWAY 808 TAMPA, FL 33615 US TAMPA, FL 33615 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: ANGEL ARROYO 07/05/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: (X) Change () Addition () Delete ARROYO, ANGEL A ARROYO, ANGEL A OWNER Name: Name: Address: 7508 STILLRIDGE DR. Address: 4302 GUNN HIGHWAY.808 City-St-Zip: TAMPA, FL 33615 City-St-Zip: TAMPA, FL 33618 Title: Title: MGR1 () Change (X) Addition () Delete Name: Name: ARROYO, JOHAN J MGR Address: Address: 8816 BRENNAN CIR. #206 City-St-Zip: City-St-Zip: TAMPA, FL 33615 Title: () Delete Title: MGR2 () Change (X) Addition ARROYO, REINALDO J MGR2 Name: Name: 4302 GUNN HIGHWAY. #808 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33618 Title: () Delete Title: MGR3 () Change (X) Addition

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.

Name:

Address:

City-St-Zip:

KRUGER, SAMANTHA M 4302 GUNN HIGHWAY. #808

TAMPA, FL 33618

SIGNATURE: ANGEL ARROYO OWNE 07/05/2007