2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

DOCUMENT # L05000066272 **FILED** 1. Entity Name 7334 HARDING AVENUE, LLC Aug 01, 2008 08:00 AM Secretary of State Principal Place of Business Mailing Address 7044 SW 8TH STREET 7044 SW 8TH STREET MIAM!, FL 33144 MIAMI, FL 33144 07292008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3467536 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MENDEZ, ORLANDO DO NOT WRITE 7044 SW 8TH STREET MIAMI, FL 33144 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, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent algoriture required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited Due by September 12, 2008 liability company did not receive the prior notice. 9. MANAGING MEMBERS/MANAGERS MGRM MENDEZ, ORLANDO NALE STREET ADDRESS 7044 SW 8TH STREET CITY-ST-ZIP MIAMI, FL 33144 MGRM TITLE 000000356850 08/01/08-80002-012 138.75 CARBALLEIRA, ALBERTO STREET ADDRESS 7044 SW 8TH STREET CITY-ST-ZIP MIAMI, FL 33144 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-79P 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 regimeer or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

GING MEMBER, OR AUTHORIZED REPREMENTATIVE

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