2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068961

Entity Name: 1319 LLC

City-St-Zip: MIAMI, FL 33134 US

FILED Jan 24, 2008 Secretary of State

O	winsing Disease Dusings	New Principal Black	of Dunimana
	rincipal Place of Business:	New Principal Place	OT Business:
9703 SOU 7	TH DIXIE HIGHWAY		
MIAMI, FL	33156 US		
Current Mailing Address:		New Mailing Address:	
9703 SOU	TH DIXIE HIGHWAY		
MIAMI, FL	33156 US		
FEI Number	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:
	DEZ, DANIA S TH DIXIE HIGHWAY		
MIAMI, FL	33156 US		
	named entity submits this statement for the e of Florida.	purpose of changing its registere	ed office or registered agent, or both,
SIGNATUI	RE:		
	Electronic Signature of Registered A	gent	Date
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete SALCINES, ALFONSO 4300 FLAGLER ST, STE.102 MIAMI, FL 33134 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete FERNANDEZ, DANIA S 9703 SOUTH DIXIE HIGHWAY, STE. 7 MIAMI, FL 33156 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete SALCINES, DAMARIS 4300 FLAGLER ST, STE. 102 MIAMI, FL 33134 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete FERNANDEZ, ROBERTO A 7000 SW 97 AVE, STE. 107 MIAMI, FL 33172 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () Delete RESTREPO, ALINA S 4300 WEST FLAGLER ST, STE.102 MIAMI, FL 33134 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGR () Delete GOMARA, LUIS 4300 WEST FLAGLER ST. STE102	Title: Name: Address:	() Change () 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.

City-St-Zip:

SIGNATURE: DANIA S. FERNANDEZ MGRM 01/24/2008