2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# L05000070982

Entity Name: ALTERNATIVE GENERATORS, LLC

Current Principal Place of Business:

22585 SW 102 CT.
MIAMI, FL 33190 US

New Principal Place of Business:

22585 SW 102 CT
MIAMI, FL 33190 US

Current Mailing Address:

22585 SW 102 CT.
MIAMI, FL 33190 US

New Mailing Address:

22585 SW 102 CT
MIAMI, FL 33190 US

FEI Number: 37-1514330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALCANTARA, SAMUEL E
22585 SW 102 CT.
MIAMI, FL FL US

Name and Address of New Registered Agent:

ALCANTARA, SAMUEL E
22585 SW 102 CT
MIAMI, FL FL 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: SAMUEL E. ALCANTARA 04/23/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ALCANTARA, SAMUEL E
Address: 22585 SW 102 CT.
City-St-Zip: MIAMI, FL 33190 US

Title: MGR ( ) Delete
Name: ALCANTARA, JOHANNA
Address: 22585 SW 102 CT.
City-St-Zip: MIAMI, FL 33190 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ALCANTARA, SAMUEL E
Address: 22585 SW 102 CT
City-St-Zip: MIAMI, FL 33190 US

Title: MGR (X) Change ( ) Addition
Name: ALCANTARA, JOHANNA
Address: 22585 SW 102 CT
City-St-Zip: MIAMI, FL 33190 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOHANNA ALCANTARA MGR 04/23/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date