2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000073325

1. Entity Name
341 PERUVIAN LLC

Principal Place of Business	Mailing Address
245 SUNRISE AVENUE PALM BEACH, FL 33480	245 SUNRISE AVENUE PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

02282007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-3206908	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ZISKA, MAURA A
222 LAKEVIEW AVENUE
SUITE 950
WEST PALM BECH, FL 33401

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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	MGRM
NAME	MOENS, LAWRENCE A
STREET ADDRESS	245 SUNRISE AVENUE
CITY-ST-ZIP	PALM BEACH, FL 33401

U00000710488
04/25/07-80044-020 150.00

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   4-13-07   (561) 655-5510

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #