


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000077153</b> 1. Entity Name <b>A VISION WITH A MISSION UNDER GOD INVESTMENTS BY L.Q., LLC</b>	
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Principal Place of Business 11273 SOUTHWEST 158 AVENUE MIAMI, FL 33196	Mailing Address 11273 SOUTHWEST 158 AVENUE MIAMI, FL 33196
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**DO NOT WRITE IN THIS SPACE**



01032007No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>51-0552012</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
  
**SPIEGEL & UTRERA, P.A.**  
**1840 SW 22ND ST.**  
**4TH FLOOR**  
**MIAMI, FL 33145**

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRV LOPEZ, JOSE R 11273 SOUTHWEST 158 AVENUE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOPEZ, JUDITH 11273 SOUTHWEST 158 AVENUE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V QUIJADA, RENE E 11273 SW 158 AVE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V QUIJADA, MARGARITA 11273 SW 158 AVE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000743217  
05/15/07-80100-025 50.00

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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: Jose Rogelio Lopez 4-27-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Jose Rogelio Lopez