

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077658

Entity Name: BONILLA-LOZANO & ASSOCIATES, LLC

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

100 LAKEVIEW DRIVE APT 309  
WESTON, FL 33326 US

## New Principal Place of Business:

16300 GOLF CLUB ROAD  
APT 618  
WESTON, FL 33326 US

## Current Mailing Address:

100 LAKEVIEW DRIVE APT 309  
WESTON, FL 33326 US

## New Mailing Address:

16300 GOLF CLUB ROAD  
APT 618  
WESTON, FL 33326 US

FEI Number: 20-3265667

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BONILLA, ALFONSO  
100 LAKEVIEW DRIVE APT 309  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

BONILLA, ALFONSO  
16300 GOLF CLUB ROAD  
APT 618  
WESTON, FL 33326 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: ALFONSO BONILLA

04/14/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BONILLA, ALFONSO  
Address: 16300 GOLF CLUB RD UNIT 618  
City-St-Zip: FORT LAUDERDALE, FL 33326 US

Title: MGRM ( ) Delete  
Name: BONILLA, MARIA E  
Address: 16300 GOLF CLUB RD UNIT 618  
City-St-Zip: FORT LAUDERDALE, FL 33326 US

Title: MGRM ( ) Delete  
Name: MONTAGUT, CLAUDIA  
Address: QUINTAS DEL MARQUEZ CASA 9C  
City-St-Zip: MOSQUERA, CUNDINAMARCA, CO 00000 CO

Title: MGRM ( ) Delete  
Name: LOZANO, ONEXIMO  
Address: QUINTAS DEL MARQUEZ CASA 9C  
City-St-Zip: MOSQUERAS, CUNDINAMARCA, CO 00000 CO

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BONILLA, ALFONSO  
Address: 16300 GOLF CLUB RD UNIT 618  
City-St-Zip: WESTON, FL 33326 US

Title: MGRM (X) Change ( ) Addition  
Name: BONILLA, MARIA E  
Address: 16300 GOLF CLUB RD UNIT 618  
City-St-Zip: WESTON, FL 33326 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ALFONSO BONILLA

MGRM

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date