

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000084521

FILED
May 01, 2008
Secretary of State

Entity Name: CASA REAL INVESTMENTS LLC

Current Principal Place of Business:

1040 WESTON RD
STE 315
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1040 WESTON RD
STE 315
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-3413774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BERTORELLI, JESUS R
1040 WESTON ROAD
SUITE 315
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GUEVARA, MANUEL M
Address: 1040 WESTON RD, STE 315
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: BERTORELLI, JESUS R
Address: 1040 WESTON RD, STE 315
City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete
Name: VENTURA, MICHAEL
Address: 1040 WESTON RD, STE 315
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES:

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

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: MANUEL M GUEVARA

MGRM

05/01/2008

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