

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90374 025 ****50.00

DOCUMENT # L05000094567 1. Entity Name 4-B WAREHOUSES, LLC			
Principal Place of Business 7171 SW 24 STREET, SUITE 102 MIAMI, FL 33155		Mailing Address 7171 SW 24 STREET, SUITE 102 MIAMI, FL 33155	
2. Principal Place of Business - No P.O. Box # 10631 SW 88 St.		3. Mailing Address 10631 SW 88 St.	
Suite, Apt. #, etc. 105		Suite, Apt. #, etc. 105	
City & State MIAMI, FL		City & State MIAMI	
Zip 33176		Zip 33176	
Country USA		Country USA	
4. FEI Number 20-4023241		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ARMADA, ALBERT J 7171 SW 24 STREET, SUITE 102 MIAMI, FL 33155		7. Name and Address of New Registered Agent Name Same Street Address (P.O. Box Number is Not Acceptable) 10631 SW 88 St. # 105 City MIAMI FL Zip Code 33176	
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		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ARMADA, ALBERT J 7171 SW 24 STREET, SUITE 102 MIAMI, FL 33155 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same Same 10631 SW 88 St. #105 MIAMI, FL 33176 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, ALBERT R 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, JORGE 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, CARLOS 10281 SW 72 STREET, SUITE 102 MIAMI, FL 33172 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: _____		Date 4/17/07 Daytime Phone # _____	