

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095620

Entity Name: A + FIRE EQUIPMENT, LLC

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

2111 SOUTH 30TH STREET
HAINES CITY, FL 33844

New Principal Place of Business:

12367 SW 132ND CT
MIAMI, FL 33186

Current Mailing Address:

2111 SOUTH 30TH STREET
HAINES CITY, FL 33844

New Mailing Address:

12367 SW 132ND CT
MIAMI, FL 33186

FEI Number: 20-3553377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTELLANOS, SANDRA
3066 LANDINGS CT
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

CABRERA, HECTOR
12367 SW 132ND CT
MIAMI, FL 33186 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: HECTOR CABRERA

01/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CABRERA, SANDRA
Address: 2111 SOUTH 30TH STREET
City-St-Zip: HAINES CITY, FL 33844

Title: MGRM () Delete
Name: CABRERA, HECTOR
Address: 2111 SOUTH 30TH STREET
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CABRERA, HECTOR
Address: 12367 SW 132 CT
City-St-Zip: MIAMI, FL 33186

Title: MGRM (X) Change () Addition
Name: CABRERA, HECTOR JR
Address: 12367 SW 132 CT
City-St-Zip: MIAMI, FL 33186

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: HECTOR CABRERA

MGRM

01/15/2008

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