2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 09, 2008 8:00 am Secretary of State

DOCU 1. Entity Nam PROVITE	ne	#L05000111	074		05-09-2008 90061 005 ***150.00					
Principal Place of Business Mailing Address										
1423 ALHAMBRA CIRCLE 1423 ALHAMBRA CIRCLE										
CORAL GABLES, FL 33134 US			CORAL GABLES, FL 33134 US							
					\$ 10 00 10 10 10 10 10 10 10 10 10 10 10			 111		
Principal Place of Business - No P.O. Box # 3. Mailing Address									1000	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03012008	Chg-LLC	CR2E083 (12/06))	
City & State			City & State		4. FEI Numbe 20-3809			pplied For lot Applicable		
Zip	ip Country		Zip Coun		ntry	5. Certificate of Status Desired				
6. Name and Address of Current			Registered Agent		7. Name and Address of New Registered Agent					
DO 14.2 -				Name						
ROJAS, RAMON E 17411 SW 119 CT.					Street Address (P.O. Box Number is Not Acceptable)					
	MIAMI, FL 33177									
		1:								
1.		_	_		City FL Zip Code					
8. The above named entity solongs his statement of the purpose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept										
the obligations of registered famil.										
SIGNATURE .	ير ا	SOCCHOMME!	·	<u>~</u>	- 1	7		<u>04 03 0</u>	<u> </u>	
English Park	Signature, typed	d or printed name of registered agent a	ind title if applicable. (NOT	L. Hegislere	ed Agent signature required	when reinstating)	** ** **	DATE	*	
FILE	NOWIII	FEE IS \$138.75		. /		Make	e check payable to	1		
After May	1, 2008	Fee will be \$538.75	,					Department of Sta	te	
9.	e de la serie	MANAGING MEMBER	DO (MANNA CEDO	10.			ADDITIONS/	CHANCES CHANCES	.,, ,,	
TITLE '	MGRM	MANAGING MEMBER	Delete	10. TITL	1		ADDITIONS	☐ Change	Addition	
NAME	ECHEVA	RRIA, LUIS		NAM				Gridings	19	
STREET ADDRESS					EET ADDRESS					
CITY-ST-ZIP	ORLAND	O, FL 32828			'-ST-ZIP					
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NAME .		• •		NAM	I		Å -			
STREET ADDRESS CITY-ST-ZIP · -	ļ				ET ADORESS -ST-ZIP					
11 I bereby c	ertify that th	e information supplied with	this filing does not qualify fo	r the eve	motions contained	in Chanter 110. E	lorida Statutos 4 fo	rther certify that the inf	ormation	
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 april a managing member or manager of the limited liability company or the receiver or true properties are contained by Chapter 608, Florida Statutes										
innied liability company of the receiver distributed entrappered to execute his report as required by Chapter box, Piorida statutes.										
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