

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114396

Entity Name: SIN FRONTERAS, LLC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

4351 NW 207 DRIVE
OPA-LOCKA, FL 33055

New Principal Place of Business:

Current Mailing Address:

4351 NW 207 DRIVE
OPA-LOCKA, FL 33055

New Mailing Address:

FEI Number: 20-3999289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

VELEZ, EMILIA F MEMBER
4351 NW 207 DR
OPA-LOCKA, FL 33055 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: EMILIA VELEZ

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: VELEZ SALTOS, PETER S
Address: 4351 NW 207 DRIVE
City-St-Zip: OPA-LOCKA, FL 33055

Title: MGRM () Delete
Name: CEDENO, MARIA R
Address: 4351 NW 207 DRIVE
City-St-Zip: OPA-LOCKA, FL 33055

Title: MGRM () Delete
Name: VELEZ, EMILLIA
Address: 4351 NW 207 DRIVE
City-St-Zip: OPA-LOCKA, FL 33055

Title: MGRM () Delete
Name: VELEZ, CESAR
Address: 4351 NW 207 DRIVE
City-St-Zip: OPA-LOCKA, FL 33055

Title: MGRM () Delete
Name: VELEZ, PETER P
Address: 4351 NW 207 DRIVE
City-St-Zip: OPA-LOCKA, FL 33055

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:

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 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: MARIA CEDENO

MGR

04/30/2006

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