

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90067 007 ****50.00

DOCUMENT # L05000115980

1. Entity Name
VISARRO INTERNATIONAL PRINTING, LLC



Principal Place of Business
**18588 SW 50TH COURT
MIRAMAR, FL 33029**

Mailing Address
**18588 SW 50TH COURT
MIRAMAR, FL 33029**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04232007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-3894135 Dec letter

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODRIGUEZ, EDUARDO
18610 SW 28 CT
MIRAMAR, FL 33029**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RODRIGUEZ, EDUARDO
18610 SW 28 CT
MIRAMAR, FL 33029** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MOJICA, BLANCA R
18610 SW 28 CT
MIRAMAR, FL 33029** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04/24/07

Date

9542533145

Daytime Phone #

ATTACHMENT

April 24, 2007

#L02000115980

Division of Corporations
Florida Department of State
PO Box 6198
Tallahassee, FL 32314

Re: Annual Report

To Whom It May Concern:

This letter is to report our new EIN which is 90-0286650. The number on file, it was processed electronically (old EIN 20-3894135). After we have used it to file our 2006 Annual Report, we received the notice from the Internal Revenue Service indicating the new number assigned to our company.

Enclose please find the letter from the Internal Revenue Service where they inform us this change.

Please make the necessary corrections in our account.

If you have any question please contact me at (954)253-3145.

Sincerely,


Blanca Mojica
Member



Department of the Treasury
Internal Revenue Service

OMB Clearance No.: 1545-0256

OGDEN UT 84201-0034

ATTACHMENT

In reply refer to: 0425869710
Mar. 15, 2007 LTR 3875C 0
90-0286650 200612 01 000

00023245

BODC: SB

#L05000115980

VISARRO INTERNATIONAL PRINTING LLC
18588 SW 50TH CT
MIRAMAR FL 33029

13039

Taxpayer Identification Number: 90-0286650
Form: 941
Tax Period: Dec. 31, 2006

Dear—Taxpayer:

We received your return referenced above under Taxpayer Identification Number (TIN) 20-3894135. Our records show you were assigned TIN 90-0286650 so we are processing your return using that TIN. You should file using that TIN for any future filings.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include a copy of this letter and, in the spaces below, provide us with a telephone number with the hours we can reach you. Also, you should keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

Marlene Waters

Marlene Waters
Dept. Manager, Input Corrections