2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

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DOCUMENT # L05000115994

1. Entity Name

QUINTERO ORLANDO HOLDINGS, LLC



FILED Mar 05, 2007 08:00 AM Secretary of State

			COD WI						
Principal Place of Business Mailing Address									
5712 S.W. 77TH TERRACE SOUTH MIAMI FL 33143 US			5712 S.W. 77TH TERRACE SOUTH MIAMI FL 33143 US						
2. Principal Place of Business - No P.O. Box #		3. Mailing Address) 	NI ĐINA ISNA IBIN I) 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE	CR2E083	3 (10/06)		
City & State		City & Stato		4. FEI Nur	PEI Number 20-3883756 Applied For Not Applicable				
Żip	Country	Zip	Country	5. Certifica	5. Certificate of Status Dosired Status Dosired Fee Required				
	6. Name and Address of Current	Registered Agent	gistered Agent		7. Name and Address of New Registered Agent				
			Namo						
547	STREPO, DIEGO L ESQ MAJORCA AVENUE		Stroot Address		s (P.O. Box Number is Not Acceptable)				
CO	RAL GABLES FL 33134								
			City			FL	Zip Cod	le	
8. The above	named entity submits this statement for	or the purpose of changing it	s registered office or re	egistered agent, or	both, in the State of Fk	orida. I am	familiar with,	and accept	
ine obligat	ions of rogistered agent.								
SIGNATURE .	Signature, typed or printed name of registered agent	and the Lengthenius (NO	TE. Registered Agent signature			DATE			
	Signature, 1974a or filmitad institution of registrate again				Τ				
		Make Check Payat	OW!!! FEE IS \$50 ble to Florida Depar le By May 1, 2007						
	444400004545	ļ .						<u> </u>	
9.	MANAGING MEMBE	· · · · · · · · · · · · · · · · · · ·	10.		ADDITIONS)	CHANGES			
TITLE Name	MGRM QUINTERO, JUAN C	☐ Delete	11TLE NAME				🗀 Change	Addition	
STREET ADDRESS	5712 S.W. 77TH TERRACE		STREET ADDRESS		U0000065	57072_		_	
CJJY-SJ-7IP	STE S.W. THE ENTAGE		CITY-ST-ZIP		03/14/07-80051-007 50.00				
Titte	MGRM	☐ Delele	T(TLL				Change	Addition	
NAME	QUINTERO, MIGUEL J		NAME						
STREET ADORESS	516 FARNDALE VILLAGE		STREET ADDRESS						
CIJY-ST-ZIP	PITTSBURGH PA 15238		CITY-ST-7IP				~		
NAME	en e	☐ Delete	ISTLE NAMĚ				Change	Addition	
STREET ADDRESS			STREET ADDRESS						
CJJY-SJ-7IP			CHY-ST-ZP						
TITLL		☐ Delete	TINLE	····			☐ Change	Addition	
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STREET ADDRESS			STREET ADDRESS						
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NAME STREET ADDRESS			NAME STREET ADDRESS						
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TITLE		☐ Delete	11TLE				Change	Addition	
NAME		L Delete	NAME					☐ vaguioi,	
STREET ADDRESS			STREET ADDIN SS						
CITY-SI-ZIP			CHY-ST-7IP					. 1	
11. I heroby o	ertify that the information supplied with	h this filing does not qualify	for the exemptions cor	ntained in Section 1	19, Florida Statutes 1	further cer	lify that the in	nlormation	

11. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes | 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 eath; 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 DANAGER, OR AUTHORIZED REPRESENTATION

Data

Daytime Phone #