

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117728

Entity Name: JUAN'S STONework LLC

FILED
Feb 02, 2007
Secretary of State

Current Principal Place of Business:

1299 W 76ST
HIALEAH, FL 33014 US

New Principal Place of Business:

1229 WEST 80TH STREET
HIALEAH, FL 33014 US

Current Mailing Address:

1299 W 76ST
HIALEAH, FL 33014 US

New Mailing Address:

1229 WEST 80TH STREET
HIALEAH, FL 33014 US

FEI Number: 20-3931546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CILAURO, FRANCISCO C
1299 W 76 ST
HIALEAH, FL 33014 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: JAMES BORDONARO

02/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CILAURO, FRANCISCO C
Address: 1299 W 76 ST
City-St-Zip: HIALEAH, FL 33014 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CILAURO, FRANCISCO C
Address: 1229 WEST 80TH STREET
City-St-Zip: HIALEAH, FL 33014 US

Title: MGRM () Change (X) Addition
Name: CILAURO, MARIA LUCIA
Address: 1229 WEST 80TH STREET
City-St-Zip: HIALEAH, FL 33014

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: FRANCISCO CILAURO

MGRM

02/02/2007

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