

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 19, 2008 8:00 am
Secretary of State

05-05-2008 90034 036 ***138.75

DOCUMENT # L05000119597																																																																																																																																			
1. Entity Name CEO GROUP, LLC																																																																																																																																			
Principal Place of Business 46 NW 36 STREET MIAMI, FL 33127			Mailing Address 46 NW 36 STREET MIAMI, FL 33127																																																																																																																																
2. Principal Place of Business - No P.O. Box #			3. Mailing Address																																																																																																																																
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4. FEI Number APPLIED FOR 71-1004340																																																																																																																																			
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required																																																																																																																																			
6. Name and Address of Current Registered Agent SARMIENTO, ALVARO S 46 NW 36 STREET MIAMI, FL 33127			7. Name and Address of New Registered Agent 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 releasing) DATE _____																																																																																																																																			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left; padding: 5px;">10. ADDITIONS/CHANGES</th> </tr> <tr> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 65%; padding: 5px;">MGR SARMIENTO, ALVARO S ☐ Delete</td> <td style="width: 20%; padding: 5px;">☐ Change ☐ Addition</td> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 65%; padding: 5px;"></td> <td style="width: 20%; padding: 5px;">☐ Change ☐ Addition</td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">SARMIENTO, ALVARO S</td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">46 NW 36 STREET</td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td style="padding: 5px;">MIAMI, FL 33127</td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;">MGRM SARMIENTO, ALVARO ☐ Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">SARMIENTO, ALVARO</td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">46 NW 36 STREET</td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td style="padding: 5px;">MIAMI, FL 33127</td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;">☐ Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;">☐ Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">TITLE</td> <td style="padding: 5px;">☐ Delete</td> <td></td> <td style="padding: 5px;">TITLE</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td></td> <td></td> <td style="padding: 5px;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> <td style="padding: 5px;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE	MGR SARMIENTO, ALVARO S ☐ Delete	☐ Change ☐ Addition	TITLE		☐ Change ☐ Addition	NAME	SARMIENTO, ALVARO S		NAME			STREET ADDRESS	46 NW 36 STREET		STREET ADDRESS			CITY-ST-ZIP	MIAMI, FL 33127		CITY-ST-ZIP			TITLE	MGRM SARMIENTO, ALVARO ☐ Delete		TITLE			NAME	SARMIENTO, ALVARO		NAME			STREET ADDRESS	46 NW 36 STREET		STREET ADDRESS			CITY-ST-ZIP	MIAMI, FL 33127		CITY-ST-ZIP			TITLE	☐ Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	☐ Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE	☐ Delete		TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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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: <u>Sarmiento</u> 4/29/08 786 344 8780																																																																																																																																			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																																																																																																																																			