

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120669

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: IND, LLC

**Current Principal Place of Business:**

1925 NW 108TH AVENUE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

10938 NW 44TH TER  
MIAMI, FL 33178

**New Mailing Address:**

FEI Number: 20-4076500

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CADENA, JUAN P  
10938 NW 44TH TER  
MIAMI, FL 33178 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: CADENA, JUAN P  
Address: 10938 NW 44 TERRACE  
City-St-Zip: DORAL, FL 33178

Title: VP ( ) Delete  
Name: CADENA, ANATILDE C  
Address: 10938 NW 44 TERRACE  
City-St-Zip: DORAL, FL 33178

Title: S ( ) Delete  
Name: CADENA, GUILLERMO E  
Address: 10938 NW 44 TERRACE  
City-St-Zip: DORAL, FL 33178

Title: TD ( ) Delete  
Name: CADENA, LUIS F  
Address: 10938 NW 44 TERRACE  
City-St-Zip: DORAL, FL 33178

Title: M ( ) Delete  
Name: CADENA, LUIS E  
Address: 10938 NW 44 TERRACE  
City-St-Zip: DORAL, FL 33178

**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: ANATILDE CADENA

VP

03/06/2007

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