

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123475

FILED
Mar 18, 2009
Secretary of State

Entity Name: MILENIUM HURRICANE PROTECTION, LLC

Current Principal Place of Business:

8500 SW 129TH TERRACE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

8500 SW 129TH TERRACE
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-4046319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARENAS, VALENTIN I
8500 SW 129TH TERRACE
MIAMI, FL 33156 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: MGRM () Delete
Name: ARENAS, VALENTIN I
Address: 9240 SW 134TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: ALJAMAL, MOHAMMAD
Address: 9260 SW 134TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: SHAQRA, MAHER
Address: 9844 SW 156TH COURT
City-St-Zip: MIAMI, FL 33196

Title: MGRM () Delete
Name: ALJAMAL, HISHAM
Address: 9260 SW 134TH PLACE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: MEILAN, MARCOS
Address: 15535 SW 110TH TERRACE
City-St-Zip: MIAMI, FL 33196

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 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: MAHER SHAQRA

MGRM

03/18/2009

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