2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000006464

1. Entity Name MAYAN CAPRON, LLC



Principal Place of Business

2665 S. BAYSHORE DRIVE

STE. PH 2A COCONUT GROVE, FL 33133 Mailing Address

2665 S. BAYSHORE DRIVE STE, PH 2A

COCONUT GROVE, FL 33133

FILED Apr 21, 2008 08:00 AN Secretary of State



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03122008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4146871

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

KATZ, EZRA 2665 S. BAYSHORE DRIVE STE, PH 2A COCONUT GROVE, FL 33133

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	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, the obligations of registered agent.	I am familiar with, and accept
SK	GNATURE	

(NOTE, Registered Agent signature required when reinstating)

UÜUQQQQQ

05/08/08-86016-614 138.75

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KATZ, EZRA 2665 S BAYSHORE DR PH-2A MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	pertify that the information supplied with this filling does not qualify for the e

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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.

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE