

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90206 001 ****50.00
02-05-2007 90206 002 *****5.00

DOCUMENT # L06000016455		
1. Entity Name LARZEV, LLC		

Principal Place of Business 19332 E. COUNTRY CLUB DR. AVENTURA, FL 33180	Mailing Address 19332 E. COUNTRY CLUB DR. AVENTURA, FL 33180
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2. Principal Place of Business - No P.O. Box # 3300 NE 192nd st Suite, Apt. #, etc. #801 City & State Aventura FL Zip 33180 Country USA	3. Mailing Address 3300 NE 192nd st Suite, Apt. #, etc. #801 City & State Aventura FL Zip 33180 Country USA
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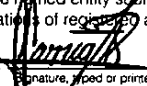
01292007 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-4379761	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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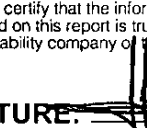
6. Name and Address of Current Registered Agent ZEVALLOS, CRISTINA M 19332 E. COUNTRY CLUB DR. AVENTURA, FL 33180	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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  Jose A Larrea / CRISTINA ZEVALLOS, Cristina Zevallos	DATE 1/31/07

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ZEVALLOS, CRISTINA M 19332 E. COUNTRY CLUB DR. AVENTURA, FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 NE 192nd st. #801 Aventura, FL 33180 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LARREA, JOSE A 19332 E. COUNTRY CLUB DR. AVENTURA, FL 33180 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 NE 192nd st. #801 Aventura, FL 33180 ☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
SIGNATURE  Jose A Larrea / CRISTINA ZEVALLOS, Cristina Zevallos	Date 1/31/07 3059361978