

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024075

FILED
Apr 13, 2007
Secretary of State

Entity Name: THE BELTRAN GROUP, LLC

Current Principal Place of Business:

3373 NW 107 ST
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

3373 NW 107 ST
MIAMI, FL 33167

New Mailing Address:

FEI Number: 20-4449649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 US

Name and Address of New Registered Agent:

DIEGO, BELTRAN M
3373 NW 107 STREET
MIAMI, FL 33167 US

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: DIEGO M. BELTRAN

04/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BELTRAN, MICHAEL A
Address: 400 ALTON ROAD #1405
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: BELTRAN, DIEGO M
Address: 1330 STILLWATER DRIVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGRM () Delete
Name: BELTRAN, DIEGO R
Address: 12580 NORTH BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33181

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:

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: DIEGO R. BELTRAN

MGRM

04/13/2007

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