


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000024526

1. Entity Name
UNIVERSITY LLC.



Principal Place of Business 14024 NW 82 AVENUE MIAMI LAKES, FL 33016	Mailing Address 14024 NW 82 AVENUE MIAMI LAKES, FL 33016
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DO NOT WRITE IN THIS SPACE



05012008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4625339	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**RAMOS, JORGE
 14024 NW 82 AVE
 MIAMI LAKES, FL 33016**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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	MGR RAMOS, JORGE 14024 NW 82 AVE MIAMI LAKES, FL 33016
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U00000946251
 05/30/08-80040-012 138.75

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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Jorge Ramos* **4/29/08** **(305) 821-4461**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #