


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90174 018 ***138.75

DOCUMENT # L06000026758	
1. Entity Name MIRAMAR BUSINESS & INVESTMENTS, LLC	

Principal Place of Business 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172	Mailing Address 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172
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2. Principal Place of Business - No P.O. Box # 1835 NW 112 AVE - UNITS	3. Mailing Address 1835 NW 112 AVENUE
Suite, Apt. #, etc. UNITS 164 & 165	Suite, Apt. #, etc. UNITS 164 & 165
City & State DORAL FL	City & State DORAL FL
Zip 33172	Country US

03202008 Chg-LLC CR2E083 (12/06)

4. FEI Number 57-1234436	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CABANAS & ASSOCIATES, P.A. 10520 NW 26TH STREET, SUITE C 201 DORAL, FL 33172	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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	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 PEDROZA, PABLO 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, PABLO 1835 NW 112 AVE - UNITS 164 & 165 DORAL FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHANG DE PEDROZA, YANGMIG 1835 NW 112 AVE UNITS 64 & 65 MIAMI, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHANG DE PEDROZA, YANGMIG 1835 NW 112 AVE - UNITS 164 & 165 DORAL FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, JULIO A 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, JULIO A 1835 NW 112 AVE - UNITS 164 & 165 DORAL FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, PABLO E 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, PABLO E 1835 NW 112 AVE - UNITS 164 & 165 DORAL FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, YILAING 1835 NW 112 AVE UNITS 64 & 65 DORAL, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEDROZA, YILAING 1835 NW 112 AVE - UNITS 164 & 165 DORAL FL 33172 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 	Date 4/13/08	Daytime Phone # (305) 629-3700
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Pablo Pedroza