

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000032193

Entity Name: ABP HOLDINGS LLC

FILED  
Aug 29, 2007  
Secretary of State

## Current Principal Place of Business:

10237 SW 227 ST  
MIAMI, FL 33190

## New Principal Place of Business:

18495 S DIXIE HWY  
289  
MIAMI, FL 33157

## Current Mailing Address:

10237 SW 227 ST  
MIAMI, FL 33190

## New Mailing Address:

18495 S DIXIE HWY  
289  
MIAMI, FL 33157

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

REYES, E.  
10237 SW 227 ST  
MIAMI, FL 33190 US

## Name and Address of New Registered Agent:

PAZ, A  
18495 S DIXIE HWY  
289  
MIAMI, FL 33157 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: A. PAZ

08/29/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: REYES, E  
Address: 10237 SW 227 ST  
City-St-Zip: MIAMI, FL 33190

Title: MGR (X) Delete  
Name: PAZ, A  
Address: 10237 SW 227 ST  
City-St-Zip: MIAMI, FL 33190

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PAZ, A  
Address: 18495 S DIXIE HWY #289  
City-St-Zip: MIAMI, FL 33157

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: A PAZ

MGM

08/29/2007

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