

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000033808

1. Entity Name
L C & H DEVELOPERS, LLC



Principal Place of Business
901 PONCE DE LEON BOULEVARD, SUITE 603
CORAL GABLES, FL 33134

Mailing Address
901 PONCE DE LEON BOULEVARD, SUITE 603
CORAL GABLES, FL 33134

FILED
Feb 25, 2008 08:00 AM
Secretary of State



01092008No Chg-LLC

CR2E083 (12/07)

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4. FEI Number
20-8709872

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALBORNOZ, WILLIAM H
901 PONCE DE LEON BOULEVARD, SUITE 603
CORAL GABLES, FL 33134

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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 _____
Signature, typed or printed name of registered agent and title if applicable (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 VARGAS, LUIS C 901 PONCE DE LEON BOULEVARD, SUITE 603 CORAL GABLES, FL 33134
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03/05/08-80039-011 138.75

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IN THIS SPACE**

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: Luis Carlos Vargas 2/12/08 305-444-1741
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #