

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000048246

1. Entity Name
CARLOS ALAS LLC



FILED

07 MAR 20 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
578 FRIDAY ROAD
QUINCY, FL 32352

Mailing Address
578 FRIDAY ROAD
QUINCY, FL 32352



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03162007 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-4866344

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BENFIELD, RON
58 SIOUX CIRCLE
HAVANA, FL 32333

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME ALAS, CARLOS ☐ Delete
STREET ADDRESS 578 FRIDAY ROAD
CITY-ST-ZIP QUINCY, FL 32352

TITLE ☐ Change ☐ Addition
NAME 700095245657
STREET ADDRESS 03/29/07--01050--005 **50.00
CITY-ST-ZIP

TITLE MGRM ☒ Delete
NAME CHACON, CARLOS
STREET ADDRESS 578 FRIDAY ROAD
CITY-ST-ZIP QUINCY, FL 32352

TITLE MGRM ☐ Change ☒ Addition
NAME Juan Carlos Contreras
STREET ADDRESS 578 Friday Rd
CITY-ST-ZIP Quincy, FL 32352

TITLE MGRM ☒ Delete
NAME RIBAS, MARCO
STREET ADDRESS 578 FRIDAY ROAD
CITY-ST-ZIP QUINCY, FL 32352

TITLE MGRM ☐ Change ☒ Addition
NAME Alberto Hernandez
STREET ADDRESS 578 Friday Rd
CITY-ST-ZIP Quincy, FL 32352

TITLE MGRM ☒ Delete
NAME PORTILLO, MIGUEL
STREET ADDRESS 578 FRIDAY ROAD
CITY-ST-ZIP QUINCY, FL 32352

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Carlos Alas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #