## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000059925

Entity Name: AGZAR, LLC

Name:

Address:

City-St-Zip:

ZARIKIAN, ZAREH

WESTON, FL 33327

358 CONSERVATION DRIVE

FILED May 02, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 358 CONSERVATION DRIVE WESTON, FL 33327 **Current Mailing Address: New Mailing Address:** 358 CONSERVATION DRIVE WESTON, FL 33327 FEI Number: 20-5033953 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SILVERBERG & ASSOCIATES, PA DODDO, DAVID J 2665 EXECUTIVE PARK DRIVE 1040 WESTON ROAD SUITE 2 SUITE 315 WESTON, FL 33326 US WESTON, FL 33331 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: DAVID J DODDO 05/02/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete AGUERREVERE, ENRIQUE J Name: Name: Address: 358 CONSERVATION DRIVE Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: ZARIKIAN, EDUARDO Name: Address: 358 CONSERVATION DRIVE Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: MGR () Delete Title: () Change () Addition ZARIKIAN, MARCO Name: Name: 358 CONSERVATION DRIVE Address: Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ENRIQUE J AGUERREVERE MGRM 05/02/2008