

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060499

FILED
Jan 21, 2009
Secretary of State

Entity Name: CVO PRO, L.L.C.

Current Principal Place of Business:

10200 SUNSET DRIVE
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

10200 SUNSET DRIVE
MIAMI, FL 33173

New Mailing Address:

FEI Number: 20-5853566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARLOW, STEPHEN P
10911 NW 38TH COURT
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HERNANDEZ, RODOLFO M.D.
Address: 10200 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: MENDEZ, LILLIAN
Address: 10200 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: LABRIT, ROSA
Address: 10200 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: MGRM () Delete
Name: BARLOW, STEPHEN P
Address: 10200 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

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

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

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

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: STEPHEN P BARLOW

MGRM

01/21/2009

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