

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071660

Entity Name: 124PL, LLC

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

12448 S.W. 127TH AVE.
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

12448 S.W. 127TH AVE.
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-5318864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUPFER, PAUL H
5541 UNIVERSITY DRIVE
SUITE 103
CORAL SPRINGS, FL 33067 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: MGR () Delete
Name: FONTE, OMAR
Address: 12448 S.W. 127TH AVE.
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: GARCIA, GENARO
Address: 12448 S.W. 127TH AVE.
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: ANDRADE, NATASHA
Address: 12448 S.W. 127TH AVE.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: GARCIA, CARLOS M
Address: 12448 S.W. 127TH AVE.
City-St-Zip: MIAMI, FL 33186

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: OMAR FONTE

MGR

01/21/2009

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