2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073812

City-St-Zip:

MIAMI, FL 33193 US

Entity Name: ACCORDION SHIELDS OF FLORIDA L.L.C.

FILED Apr 15, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7329 NW 79TH TERR MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 7329 NW 79TH TERR MIAMI, FL 33166 FEI Number: 56-2602485 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: MEDINA, CARLOS O 3172 SW 153TH PATH MIAMI, FL 33185 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MEDINA, CARLOS O Name: Name: 100 BAYVIEW DR. APT 1922 Address: Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PAREDES DE FERRO, LUISA M Name: Address: 15908 SW 99TH STREET Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FERRO, LOURDES M Name: Name: Address: 15908 SW 99TH STREET Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: FERRO-ESCUZA, MARIA L Name: Address: 6263 SW 165TH AV Address: MIAMI, FL 33193 US City-St-Zip: City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ESCUZA, PABLO A Name: Name: 6263 SW 165TH AV Address: Address:

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.

City-St-Zip:

SIGNATURE: CARLOS MEDINA MGR 04/15/2008