2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000079605

1. Entity Name

A & D INVESTMENT PARTNERS, LLC



Principal Place of Business

9705 FONTAINEBLEAU BLVD

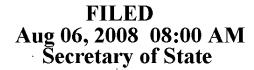
APT B102

MIAMI, FL 33172 US

Mailing Address

9705 FONTAINEBLEAU BLVD APT B102

MIAMI, FL 33172 US





07292008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5436686

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulred

~6. Name and Address of Current Registered Agent

MELENDEZ VEGA, LLC 10511 N KENDALL DR STE C-203 MIAMI, FL 33176

DO NOT WRITE IN THIS SPACE

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 life if applicable.

(NOTE: Registered Agent signature required when reinstating

DATE

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVILA, DIANA M 9705 FONTAINEBLEAU BLVD # B102 MIAMI, FL 33172
TITLE NAME STREET AODRESS CITY-ST-ZIP	MGR MAIRENA, ANA C 220 MIRACLE MILE # 236 MIAMI, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-7IR	

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DO NOT WRITE IN THIS SPACE

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:

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

07-29-08

Daytime Phone #