

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000081138

1. Entity Name
2950 LORM, LLC



Principal Place of Business

2950 S.W. 27 AVE.
SUITE 310
MIAMI, FL 33133 US

Mailing Address

2950 S.W. 27 AVE.
SUITE 310
MIAMI, FL 33133 US



01072008No Chg-LLC

CR2E083 (12/07)

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4. FEI Number
20-5397928

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

REVUELTA, LUIS
1417 SANTA CRUZ
CORAL GABLES, FL 33134

**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

Elaiza Revuelta
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/08

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000789769
01/23/08-80006-016 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
REVUELTA, LUIS
2950 S.W. 27 AVE., STE. 100
MIAMI, FL 33133

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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 by me personally. 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 605, Florida Statutes.

SIGNATURE: *Elaiza Revuelta*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ELAIZA REVUELTA