

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000083468 1. Entity Name 7350 WESTPOINT BLVD UNIT 232, LLC	
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Principal Place of Business 2002 CURRY FORD RD ORLANDO, FL 32806 US	Mailing Address PO BOX 721587 ORLANDO, FL 32872 US
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DO NOT WRITE IN THIS SPACE



04292008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5455231	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MOLINA, JULIO 1820 AMBERLY AVE ORLANDO, FL 32822

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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.

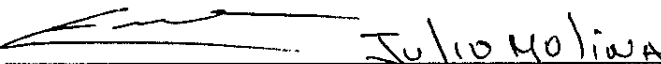
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	U000000936921 05/27/08-80028-025 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOLINA, JULIO 1820 AMBERLY AVE ORLANDO, FL 32822
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TABAR, JORGE 2002 CURRY FORD RD ORLANDO, FL 32806
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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	Date _____ Daytime Phone # _____
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