

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 17, 2008 8:00 am**  
**Secretary of State**

04-17-2008 90263 001 \*\*\*277.50

DOCUMENT # L06000088686

1. Entity Name  
DIPLOMAT COURT INVESTMENT LLC



Principal Place of Business  
10271 SW 72ND STREET  
STE 102  
MIAMI, FL 33173

Mailing Address  
10271 SW 72ND STREET  
STE 102  
MIAMI, FL 33173

30004154

2. Principal Place of Business - No P.O. Box #

10481 N. Kendall Dr.

Suite, Apt. #, etc.

Suite D-203

City & State

Miami, FL

Zip

33176

Country

USA

3. Mailing Address

10481 N. Kendall Dr.

Suite, Apt. #, etc.

Suite D-203

City & State

Miami, FL

Zip

33176

Country

USA

01082008 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-5521486  
APPLIED FOR

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ALOS, ANDRES F  
10271 SW 72ND STREET  
STE 102  
MIAMI, FL 33173

7. Name and Address of New Registered Agent

Name ALOS, Andres F  
Street Address (P.O. Box Number is Not Acceptable)  
10481 N. Kendall Drive D-203  
City Miami FL Zip Code 33176

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-14-08

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

Make check payable to,  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME VIAS, MARTHA  
STREET ADDRESS 10271 SW 72ND STREET  
CITY-ST-ZIP MIAMI, FL 33173

TITLE MGRM ☐ Delete  
NAME ALOS, ANDRES  
STREET ADDRESS 10271 SW 72ND STREET  
CITY-ST-ZIP MIAMI, FL 33173

TITLE MGRM ☐ Delete  
NAME PADRON, RAFAEL JR  
STREET ADDRESS 10271 SW 72ND STREET  
CITY-ST-ZIP MIAMI, FL 33173

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition  
NAME VIAS, Martha  
STREET ADDRESS 10481 N. Kendall Drive Ste. D-203  
CITY-ST-ZIP Miami, FL 33176

TITLE MGRM ☒ Change ☐ Addition  
NAME ALOS, Andres  
STREET ADDRESS 10481 N. Kendall Drive Ste. D-203  
CITY-ST-ZIP Miami, FL 33176

TITLE MGRM ☒ Change ☐ Addition  
NAME Padron, Rafael Jr.  
STREET ADDRESS 10481 N. Kendall Drive Ste. D-203  
CITY-ST-ZIP Miami, FL 33176

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-14-08