## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000096933

City-St-Zip:

CORAL GABLES, FL 33146

Entity Name: AYME PROPERTIES, LLC

FILED Feb 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8325 SW 54 AVE MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 8325 SW 54 AVE MIAMI, FL 33143 FEI Number: 20-5612609 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: ESPINOSA-MENDOZA, CRISTINA CPA 8325 SW 54 AVE MIAMI, FL 33143 US 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 ESPINOSA, CRISTINA Name: Name: 8325 SW 54 AVE Address: Address: City-St-Zip: MIAMI, FL 33145 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: ESPINOSA, MANUEL A Name: Address: 8330 SW 56TH STREET Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition ESPINOSA, ROMULO A Name: Name: Address: 8201 SW 87TH STREET Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: ESPINOSA, ANGEL J JR Name: 8380 SW 90TH STREET Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: MGRM Title: ( ) Delete Title: () Change () Addition ESPINOSA, CHARLES B Name: Name: 1215 BLUE ROAD 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: CRISTINA ESPINOSA MGRM 02/05/2009