

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106807

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: ALPHAOMEGA PROJECTS LLC

**Current Principal Place of Business:**

1402 NW 139 AVE  
PEMBROKE PINES, FL 33028 US

**New Principal Place of Business:**

**Current Mailing Address:**

1402 NW 139 AVE  
PEMBROKE PINES, FL 33028 US

**New Mailing Address:**

FEI Number: 20-5844236      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PAEZ, PABLO G  
1402 NW 139 AVE  
PEMBROKE PINES, FL 33028 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: PAEZ, PABLO G  
Address: 1402 NW 139 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: MGRM ( ) Delete  
Name: ASPIRINO, GUADALUPE C  
Address: 1402 NW 139 AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: PABLO G PAEZ

MGRM

03/12/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date