

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000108952

1. Entity Name
CARLODALY SPECIALTIES LLC



Principal Place of Business
2631 HAVANA DRIVE
MIRAMAR, FL 33023 US

Mailing Address
2631 HAVANA DRIVE
MIRAMAR, FL 33023 US

FILED
Jul 15, 2008 08:00 AM
Secretary of State



07102008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, CARLOS M
2631 HAVANA DRIVE
MIRAMAR, FL 33023

**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

Carlos Gonzalez
Signature, typed or printed name of registered agent and title if applicable

CARLOS GONZALEZ
(NOTE: Registered Agent signature required when reinstating)

7-10-08
DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000954965
07/15/08-80005-016 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GONZALEZ, CARLOS M
STREET ADDRESS	2631 HAVANA DRIVE
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	MGRM
NAME	GONZALEZ, ODALYS B
STREET ADDRESS	2631 HAVANA DRIVE
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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 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:

Carlos Gonzalez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7-10-08
Date

305-914-6951
Daytime Phone #