

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108957

Entity Name: LFLM INVESTMENTS, LLC

FILED
Apr 07, 2007
Secretary of State

Current Principal Place of Business:

201 12TH AVENUE EAST
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

201 12TH AVENUE EAST
PALMETTO, FL 34221

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF LAURIE E. OHALL, P.A.
9350 BAY PLAZA BLVD.
SUITE 120-04
TAMPA, FL 33619 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: MAHIQUEZ, FLORA R
Address: 201 12TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: MGRM () Delete
Name: MAHIQUEZ, LUIS F
Address: 201 12TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: MGRM () Delete
Name: MAHIQUEZ, LUIS F III
Address: 11010 WHITMAN LANE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES:

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

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 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: FLORA R MAHIQUEZ

MRS.

04/07/2007

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