## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000113628

536 BILTMORE WAY

City-St-Zip: CORAL GABLES, FL 33134

Address:

Entity Name: AVILA USA, LLC

FILED May 22, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	1ORE WAY ABLES, FL 33134			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
536 BILTMORE WAY CORAL GABLES, FL 33134		116 SW 28TH RD. MIAMI, FL 33129		
In accordan	: 20-8013127 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability I Address of Current Registered Agent	company did not receive the prior notic	Certificate of Status Desired ( ) ce. of New Registered Agent:	
CUEVAS 8 536 BILTM	ANDREW ESQ. & ORTIZ P.A. IORE WAY ABLES, FL 33134 US			
	named entity submits this statement for eof Florida.	he purpose of changing its registere	ed office or registered agent, or both	
SIGNATUI	RE:			
	Electronic Signature of Registered	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete AVILA, ENRIQUE EDUARD 536 BILTMORE WAY CORAL GABLES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM ( ) Delete AVILA, ANTONIO RAMON 536 BILTMORE WAY CORAL GABLES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PS () Delete AVILA, ENRIQUE EDUARD 536 BILTMORE WAY CORAL GABLES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VPT ( ) Delete AVILA, ANTONIO RAMON	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ENRIQUE EDUARDO AVILA MGRM 05/22/2007