

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000114301

FILED  
Mar 26, 2008  
Secretary of State

Entity Name: THE H.N.Z. GROUP, L.L.C.

**Current Principal Place of Business:**

100 ANDALUSIA  
203  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 140234  
CORAL GABLES, FL 33114 US

**New Mailing Address:**

FEI Number: 20-5952661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOUSA, RINEL  
100 ANDALUSIA AVENUE  
203  
CORAL GABLES, FL 33134 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: SOUSA, RINEL  
Address: P.O. BOX 140234  
City-St-Zip: CORAL GABLES, FL 331140234 US

Title: MGRM ( ) Delete  
Name: SOUSA, RANDALL  
Address: P.O. BOX 140234  
City-St-Zip: CORAL GABLES, FL 331140234 US

**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: RINEL SOUSA

MGRM

03/26/2008

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