

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015735

FILED
Jan 23, 2008
Secretary of State

Entity Name: TREBOL HOLDINGS, LLC

Current Principal Place of Business:

17031 NW 10TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

17031 NW 10TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

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

Name and Address of Current Registered Agent:

PAUL SALVER, P.A.
2721 EXECUTIVE PARK DR #4
WESTON, FL 33331 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: SAAD, GERMAN
Address: 17031 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: DE SAAD, JANETH S
Address: 17031 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: SAAD, ALEXANDRA
Address: 17031 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: SAAD, JUAN C
Address: 17031 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM () Delete
Name: SAAD, MARIA C
Address: 17031 NW 10TH STREET
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:

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 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: GERMAN SAAD PRES 01/23/2008

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