2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# L07000015766

Entity Name: CEMEXPRESS, LLC

Current Principal Place of Business:

9815 NW 117 WAY
MEDLEY, FL 33178

New Principal Place of Business:

Current Mailing Address:

9815 NW 117 WAY
MEDLEY, FL 33178

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:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

FOWLER WHITE BURNETT PA
1395 BRICKELL AVE., 14TH FL
ATTN: MARILI CANCIO, ESQ.
MIAMI, FL 33131 US

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: MARILI CANCIO, ESQ. 04/11/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CRUZ, FRANCISCO O
Address: 9815 NW 117 WAY
City-St-Zip: MEDLEY, FL 33178

Title: MGR ( ) Delete
Name: CANCIO, JOSE A
Address: 9815 NW 117 WAY
City-St-Zip: MEDLEY, FL 33178

Title: MGR ( ) Delete
Name: DIAS, BERNARDO C
Address: 9815 NW 117 WAY
City-St-Zip: MEDLEY, FL 33178

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 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: FRANCISCO O. CRUZ MGR 04/11/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date