

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019380

FILED
Apr 08, 2009
Secretary of State

Entity Name: SOLORZANO BROS PROPERTIES, LLC

Current Principal Place of Business:

19221 CINNAMON RIDGE WY
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

19221 CINNAMON RIDGE WY
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 20-8480731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLORZANO, LUIS G
19221 CINNAMON RIDGE WY
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

SOLORZANO LANDA, LUIS G
19221 CINNAMON RIDGE WY
TAMPA, FL 33647 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: LUIS G SOLORZANO L

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOLORZANO LANDA, LUIS G
Address: 19221 CINNAMON RIDGE WY
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: SOLORZANO, ALBERTO
Address: 20011 TAMiami AV
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: SOLORZANO, MANUEL G
Address: 19221 CINNAMON RIDGE WY
City-St-Zip: TAMPA, FL 33647 US

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: LUIS G SOLORZANO L

MGRM

04/08/2009

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