2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022498

Entity Name: SILVA + PARDO LLC

FILED Mar 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4000 PONCE DE LEON, SUITE 470 CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

8009 NW 36 ST., SUITE #230. DORAL, FL 33166

FEI Number: 20-8575027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SILVA, ARISTIDES SILVA, ARISTIDES

4360 NW 107 AVE., APT. #308 10035 NW 44TH TER, APT. #305 DORAL, FL 33178 DORAL, FL 33178

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: ARISTIDES SILVA 03/03/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

SILVA, ARISTIDES Name: SILVA, ARISTIDES Name: 4360 NW 107 AVE., APT. #308 Address: 10035 NW 44TH TER, APT. #305 Address:

City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete Title: MGRM (X) Change () Addition PARDO DE BELLO, MARIA E Name: PARDO DE BELLO, MARIA E Name:

Address: 5613 NW 112 PL. Address: 10840 NW 84TH ST City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete Title: MGRM (X) Change () Addition

BELLO ROMERO, JESUS R BELLO ROMERO, JESUS R Name: Name: Address: 5613 NW 112 PL Address: 10840 NW 84TH ST City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete Title: MGRM (X) Change () Addition

PARDO-IZQUIERDO, TALLULATH PARDO-IZQUIERDO, TALLULATH Name: Name: 10840 NW 84TH ST Address: 5613 NW 112 PL. Address: DORAL, FL 33178 DORAL, FL 33178

City-St-Zip: City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition HILLER DE SILVA, YANNY HILLER DE SILVA, YANNY Name: Name:

4360 NW 107 AVE., APT. #308 10035 NW 44TH TER, APT. #305 Address: Address:

City-St-Zip: DORAL, FL 33178 City-St-Zip: DORAL, FL 33178

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: ARISTIDES SILVA **MGRM** 03/03/2009