

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000026626

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ALHAMBRA LLC

**Current Principal Place of Business:**

11500 WESTWOOD BLVD.  
1621  
ORLANDO, FL 32821

**New Principal Place of Business:**

11500 WESTWOOD BLVD.  
1212  
ORLANDO, FL 32821

**Current Mailing Address:**

11500 WESTWOOD BLVD.  
1621  
ORLANDO, FL 32821

**New Mailing Address:**

11500 WESTWOOD BLVD.  
1212  
ORLANDO, FL 32821

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

CARDOZO, OSWALDO A  
11500 WESTWOOD BLVD.  
1621  
ORLANDO, FL 32821 US

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

CARDOZO, OSWALDO A  
11500 WESTWOOD BLVD.  
1212  
ORLANDO, FL 32821 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:

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CARDOZO, OSWALDO A  
Address: 11500 WESTWOOD BLVD.  
City-St-Zip: ORLANDO, FL 32821

Title: SEC ( ) Delete  
Name: CARDOZO, OSWALDO R JR.  
Address: 11500 WESTWOOD BLVD.  
City-St-Zip: ORLANDO, FL 32821

**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: OSWALDO A. CARDOZO

MR

04/30/2008

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