

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000030128

Entity Name: SOLARVIT, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

2612 NW 112 AVENUE
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

2612 NW 112 AVENUE
DORAL, FL 33172

New Mailing Address:

FEI Number: 26-0595911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARMENATES PANELL, P.A.
8410 NW 53 TERRACE, STE. 100
DORAL, FL 33166 US

Name and Address of New Registered Agent:

PANELL LAW FIRM LLC
8410 NW 53 TERRACE, STE. 100
DORAL, FL 33166 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: ELIEZER PANELL

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: USECHE, JAVIER
Address: 5171 NW 106 AVENUE
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: GONZALEZ, ALVARO
Address: 2612 NW 112 AVENUE
City-St-Zip: DORAL, FL 33172

Title: MGRM () Delete
Name: USECHE, GABRIEL
Address: 5171 NW 106 AVENUE
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: TORRES, GOLERNES
Address: 5171 NW 106 AVENUE
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: ALVARO GONZALEZ

MGRM

04/07/2009

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