

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000033579

Entity Name: KABBUH LLC

FILED
Sep 02, 2008
Secretary of State

Current Principal Place of Business:

5571 N.W. 112TH AV. #102
DORAL, FL 33178

New Principal Place of Business:

3436 N. MIAMI AVE
MIAMI, FL 33127

Current Mailing Address:

5571 N.W. 112TH AV. #102
DORAL, FL 33178

New Mailing Address:

6157 NW 167 ST F-11
MIAMI, FL 33015

FEI Number: 20-8747192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUERTA, DANIEL
4555 N.W. 99TH AVE., #105
DORAL, FL 33178 US

Name and Address of New Registered Agent:

TORTOZA, LIGBENIG
3400 NE 192 ST # 505
AVENTURA, FL 33180 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: LIGBENIG V. TORTOZA

09/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TORTOZA, LIGBENIG V
Address: 5571 N.W. 112TH AVE., #102
City-St-Zip: DORAL, FL 33178

Title: MGR () Delete
Name: PUERTA, DANIEL
Address: 5571NW 112TH AVE #102
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TORTOZA, LIGBENIG V
Address: 3400 NE 192 ST # 505
City-St-Zip: AVENTURA, FL

Title: DIR (X) Change () Addition
Name: DE LOS RIOS, FABIOLA
Address: 6157 NW 167 ST SUITE F-11
City-St-Zip: MIAMI, FL 33015

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: LIGBEGNI TORTOZA

MGR

09/02/2008

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