

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039385

Entity Name: MR. A ENTERPRISES, L.L.C.

FILED  
May 28, 2008  
Secretary of State

**Current Principal Place of Business:**

11300 NW 87 COURT STE 147  
HIALEAH GARDENS, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

11300 NW 87 COURT STE 147  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

FEI Number: 20-8854317      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

VAZQUEZ, CARLOS  
11300 NW 87 COURT STE 147  
HIALEAH GARDENS, FL 33018      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: VAZQUEZ, CARLOS  
Address: 14428 NW 88 CT.  
City-St-Zip: MIAMI LAKES, FL 33018

Title: MGRM      ( ) Delete  
Name: VAZQUEZ, MARJORIE  
Address: 14428 NW 88 CT.  
City-St-Zip: MIAMI LAKES, FL 33018

**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: CARLOS VAZQUEZ

MGRM

05/28/2008

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