

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 22, 2008 8:00 am
Secretary of State

08-22-2008 90012 002 *****5.00
08-22-2008 90012 001 ***138.75

30010966



07142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5323900	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

EMANUEL, EDWARD SR.
15130 S.W. 153RD ST.
MIAMI, FL 33187

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR EMANUEL, EDWARD SR. 15130 S.W. 153RD ST. MIAMI, FL 33187
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ARAUJO-EMANUEL, FELICIA A 15130 S.W. 153RD ST. MIAMI, FL 33187
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Charles Emanuel Sr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #