

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90137 043 ***138.75

DOCUMENT # L07000046025

1. Entity Name

MUNDI LEASING LLC



Principal Place of Business

240 EAST FLAGLER STREET
MIAMI FL 33131

Mailing Address

240 EAST FLAGLER STREET
MIAMI FL 33131



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAMACHO, CESAR R
240 EAST FLAGLER STREET
MIAMI FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME CAMACHO, CESAR R
STREET ADDRESS 240 EAST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME DASCAL, CHARLES
STREET ADDRESS 16165 S DIXIE HWY
CITY-ST-ZIP MIAMI FL 33165

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME CHARIFF, JONATHAN
STREET ADDRESS 240 EAST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME VILLAMANAN, MANUEL
STREET ADDRESS 240 EAST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME LUJAN, RICARDO
STREET ADDRESS 240 EAST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME HILTON, JOHN
STREET ADDRESS 240 EAST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

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

Date

Daylate Penalties

02/14/2008