

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047578

**FILED**  
**Apr 16, 2009**  
**Secretary of State**

**Entity Name:** OLIVERA FLORIDA HOLDINGS LLC

**Current Principal Place of Business:**

1221 BRICKELL AVE  
MIAMI, FL 33131

**New Principal Place of Business:**

144W BRANDON TOWN CENTER  
BRANDON, FL 33511 US

**Current Mailing Address:**

POB 193846  
SAN JUAN, PR 009193846

**New Mailing Address:**

PO BOX 193846  
SAN JUAN, PR 009193846

**FEI Number:** 75-3240702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331 US

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

COHN, VANESSA N ESQ  
302 KNIGHTS RUN AVENUE  
# 1100  
TAMPA, FL 33602 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: VANESSA N. COHN

04/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: OLIVERA, GABRIEL  
Address: POB 193846  
City-St-Zip: SAN JUAN, PR 009193846

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MEMORIAL CAPITAL CORP  
Address: PO BOX 193846  
City-St-Zip: SAN JUAN, PR 009193846

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: GABRIEL OLIVERA

P

04/16/2009

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