

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000052054

Entity Name: GREENMAX, LLC

FILED
Feb 11, 2009
Secretary of State

Current Principal Place of Business:

14540 SW 136TH STREET
SUITE 106
MIAMI, FL 33186

Current Mailing Address:

14540 SW 136TH STREET
SUITE 106
MIAMI, FL 33186

New Principal Place of Business:

14540 SW 136TH STREET
SUITE 102
MIAMI, FL 33186

New Mailing Address:

14540 SW 136TH STREET
SUITE 102
MIAMI, FL 33186

FEI Number: 74-3216013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE GREENWICH DEVELOPMENT GROUP, LLC
14540 SW 136TH STREET
SUITE 106
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

THE GREENWICH DEVELOPMENT GROUP, LLC
14540 SW 136TH STREET
SUITE 102
MIAMI, FL 33186 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: ERNESTO LOPES

02/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LOPES, ERNESTO
Address: 14540 SW 136TH STREET, SUITE 102
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: RUIZ, FRANCISCO
Address: 14540 SW 136TH STREET, SUITE 102
City-St-Zip: MIAMI, FL 33186

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: ERNESTO LOPES

MGR

02/11/2009

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