2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054422

Address:

City-St-Zip:

Entity Name: AXALCA EXPRESS CALLC

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7500 NW 54 ST MIAMI, FL 33166 Current Mailing Address: New Mailing Address: New Mailing Address: New Mailing Address: PEI Number: 26-0214344 PEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RUIZ, LUIS A 2775 NE 187 ST 603 AVENTURA, FL 33180 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bott in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: MGR () Delete Name: RUIZ, LUIS A Address: 2775 NE 187 ST # 603 Address: City-St-Zip: Title: MGR () Delete Name: RUIZ, EDUARDO Address: 1275 NM 140 ETRRACE City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: MGR () Change () Addition Name: RUIZ, EDUARDO Address: 1275 NM 140 ETRRACE City-St-Zip: PEMBROKE PINES, FL 33028							
Current Mailing Address: New Mailing Address: New Mailing Address: New Mailing Address: New Mailing Address: Now Mailing Address of New Registered () Now Registered Agent: Now Registered Agent: Now Registered Agent: Now Now Registered Agent: Now Registered Agent: Now Registered Agent: Now Now Registered Agent: Now Now Registered Agent: Now Registered Agent: Now Registered Agent: Now Now Registered Agent: Now Registered Agent: Now Now Registered Agent: Now Register	Current Principal Place of Business:			New Principal Place of Business:			
7500 NW 54 ST MIAMI, FL 33166 FEI Number: 26-0214344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: RUIZ, LUIS A 2775 NE 187 ST 603 AVENTURA, FL 33180 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bott in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: MGR () Delete Name: RUIZ, LUIS A Address: 2776 Ne 187 ST # 603 City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MGR () Delete Name: RUIZ, EDUARDO Address: City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: MGR () Delete Name: RUIZ, EDUARDO Address: City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: MGR () Change (X) Addition							
MIAMI, FL 33166 FEI Number: 26-0214344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: RUIZ, LUIS A 2775 NE 187 ST 603 AVENTURA, FL 33180 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bott in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date	Current Mailing Address:			New Mailing Address:			
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MANAGING MEMBERS/MANAGERS: Title: MGR () Delete Name: RUIZ, LUIS A Address: 2775 NE 187 ST # 603 City-St-Zip: AVENTURA, FL 33180 Title: () Delete Name: RUIZ, EDUARDO Address: City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: MGR () Change (X) Addition Name: RUIZ, EDUARDO Address: 1275 NW 140 ETRRACE City-St-Zip: PEMBROKE PINES, FL 33028	2775 NE 1 603 AVENTUR The above in the State	87 ST A, FL 33180 named entity of Florida. RE:	submits this statement for the pu				
Title: MGR () Delete Name: RUIZ, LUIS A Name: Address: 2775 NE 187 ST # 603 Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MGR () Change (X) Addition Name: RUIZ, EDUARDO Address: City-St-Zip: Delete Name: RUIZ, EDUARDO Address: 1275 NW 140 ETRRACE City-St-Zip: PEMBROKE PINES, FL 33028 Title: () Delete Title: MGR () Change (X) Addition							
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Name: CORVAIA_JORGE	City-St-Zip: Title:	()) Delete	City-St-Zip: Title:	1275 NW 140 ETRRACE PEMBROKE PINES, FL 33028 MGR () Change (X) Addition		

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.

Address:

7500 NW 54 STREET

City-St-Zip: MIAMI, FL 33166

SIGNATURE: LUIS A RUIZ MGR 04/30/2008