

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000064567

Entity Name: ASR CELLULAR, LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

235 EAST COMMERCIAL BOULEVARD
SUITE A
LAUDERDALE BY THE SEA, FL 33308

New Principal Place of Business:

6867 JULIA GARDENS
COCONUT CREEK, FL 33073 US

Current Mailing Address:

6550 NORTH FEDERAL HIGHWAY
SUITE 510
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 26-0428652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRR, JAMES O JR.
6550 NORTH FEDERAL HIGHWAY
SUITE 510
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DE ALMONTE, ROSANDRA
Address: 6867 JULIA GARDENS
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: MGRM () Delete
Name: ALMONTE, LIONEL R
Address: 6867 JULIA GARDENS
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: MGRM () Delete
Name: ALMONTE, LIONEL A
Address: 6867 JULIA GARDENS
City-St-Zip: COCONUT CREEK, FL 33073 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: ALMONTE, LEONEL R
Address: 6867 JULIA GARDENS
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: MGRM (X) Change () Addition
Name: ALMONTE, LEONEL A
Address: 6867 JULIA GARDENS
City-St-Zip: COCONUT CREEK, FL 33073 US

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: LEONEL R. ALMONTE

MGRM

04/24/2008

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