2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072512

Entity Name: ESPELLC

FILED Mar 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1024 NW 124TH TERRACE 1404 NW 126 AVE 103 SUNRISE, FL 33323

SUNRISE, FL 33323

Current Mailing Address: New Mailing Address:

1024 NW 124TH TERRACE 1404 NW 126 AVE SUNRISE, FL 33323

SUNRISE, FL 33323

FEI Number: 26-0517184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ORELLANA, FLOR
1024 NW 124TH TERRACE
103

ORELLANA, FLOR
1404 NW 126 AVE
SUNRISE, FL 33323 US

SUNRISE, FL 33323 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: FLOR ORELLANA 03/28/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 ORELLANA, FLOR
 Name:
 ORELLANA, FLOR

 Address:
 1024 NW 124TH TERRACE
 Address:
 1404 NW 126 AVE

 City-St-Zip:
 SUNRISE, FL 33323
 City-St-Zip:
 SUNRISE, FL 33323

Title: MGR () Delete Title: () Change () Addition

 Name:
 TOBAR, CARLÁ
 Name:

 Address:
 9215 SW 78 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33156
 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: FLOR ORELLANA MGR 03/28/2009