9/8/2008-90049-001 \$158.75-\$138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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ANNUAL REPORT									COLUMN TO SERVICE STATE OF THE PERSON SERVICE STATE SERVICE STATE SERVICE STATE OF THE PERSON SERVICE STATE SERVICE STATE SERVICE STATE SERVIC
1. Entity Nam	MENT # L070							OCT -3 CRETARY HIGHAUSTE MIASSEE	
Principal Plac	e of Business		Mailing Address		•				
	12ND TERRACE		11245 NW 42ND TERRACE				_	17 Tables	Ŧ.C
DORAL FL 33178 US			DORAL FL 33178 US				~/	つ (副型語)5.	7.
			201412112 30110	-		A TOTALITIN DIN T			
2. Principal Place of Business - No P.O. Box #			3. Mailing Address			114 11111 1114 1114 1114 1114 111)) Titl (1964) (1964)		
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.		07092008	Chg-LLC	CR2E083 (12/0	<u> </u>		
Zip Country			City & State Zip Country		4. FEI Number	0805		Applied For Not Applicable	
2.0	_ Country			Coun	niry –	5. Certificate of	Status Desired	\$5.00 / Fee Requ	Additional
	6. Name and Address	of Current R	egistered Agent		,	7. Name and A	ddress of New R	Registered Agent	
			-		Name				
BOESCH, JEAN P 11245 NW 42ND TERRACE			Street Address (P.O. Box Number is Not Acceptable)			
DORAL, FL 33178				;					
	•				City			FL Zip C	ode
8. The above the obligat	named entity submits this s tions of registered agent.	statement for t	the purpose of changing its	registere	ed office or register	ad agent, or both,	, in the State of Fk	. — ,	th, and accept
SIGNATURE	Signature, typed or printed name of re	soniared sount en	d bite il applicable (NOT)	Benetiere	d Agent signature required	urban nainteen tunni		DATE	
		7		·	7941 10401 1040	- I		UAIE	
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. liability company did re					93(2)(b), F.S., the eive the prior not	e limited ce.		e check payable to Department of St	
9.	MANAGI	NG MEMBER	S/MANAGERS	10.	.		ADDITIONS/	CHANGES	
TITLE	MGRM		☐ Delete	TITLE				☐ Chang	e
NAME	QUINTO, JUAN D			NAME					
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inte	MGRM		☐ Defete	TITLE				☐ Change	Addition
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