2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095916

SALTIEL, SORAYA

City-St-Zip: HIALEAH, FL 33016

2741 WEST 76 STREET, 2ND FLOOR

Name:

Address:

Entity Name: MIAMI DISTRIBUTION CENTER, LLC

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
2741 WES 2ND FLOO HIALEAH,				
Current Mailing Address:			New Mailing Address:	
2741 WES 2ND FLOO HIALEAH,				
FEI Number	: 26-1165854	FEI 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:	
2ND FLOO HIALEAH,	ST 76 STREET DR FL 33016 US	3		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
SIGNATU	RE:			
Electronic Signature of Registered Age			ent Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	SALTIEL, ARM	S STREET, 2ND FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SALTIEL, MOI	S STREET, 2ND FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SALTIEL, LUIS	S STREET, 2ND FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	MGR () Delete	Title:	() Change () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARMANDO SALTIEL MGR 04/24/2009