

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105034

FILED
Mar 03, 2008
Secretary of State

Entity Name: ANTEOJITOS PROPERTY, LLC

Current Principal Place of Business:

2437 NW 97 AVE
STE 3037
MIAMI, FL 33172

New Principal Place of Business:

2437 NW 97 AVE
SUITE 3037
MIAMI, FL 33172 US

Current Mailing Address:

2437 NW 97 AVE
STE 3037
MIAMI, FL 33172

New Mailing Address:

2437 NW 97 AVE
SUITE 3037
MIAMI, FL 33172 US

FEI Number: 26-1241179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTEVEZ, RAMON F
2437 NW 97 AVE
STE 3037
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

ESTEVEZ, RAMON F
2437 NW 97 AVE
SUITE 3037
MIAMI, FL 33172 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: RAMON ESTEVES

03/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ESTEVES, RAMON F
Address: 2437 NW 97 AVE, STE 3037
City-St-Zip: MIAMI, FL 33172

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ESTEVES, RAMON F
Address: 2437 NW 97 AVE, SUITE 3037
City-St-Zip: MIAMI, FL 33172 US

Title: MGRM () Change (X) Addition
Name: PISANI, MARIA E
Address: 2437 NW 97 AVE, SUITE 3037
City-St-Zip: MIAMI, FL 33172 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: RAMON ESTEVES

MGRM

03/03/2008

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