

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116101

FILED
Feb 24, 2009
Secretary of State

Entity Name: ABINADER DIAZ GONZALEZ, LLC

Current Principal Place of Business:

930 ROBERTS RD
42/59
LAKE HAMILTON, FL 33851 US

New Principal Place of Business:

Current Mailing Address:

5009 HEMINGWAY CIR
HAINES CITY, FL 33844 US

New Mailing Address:

34 BRADFORD CT
KISSIMMEE, FL 34758 US

FEI Number: 26-1434783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABINADER, DOMINGO
5009 HEMINGWAY CIR
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

GONZALEZ, NICOLAS
34 BRADFORD CT
KISSIMMEE, FL 34758 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: JUAN B DIAZ

02/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: ABINADER, DOMINGO R P
Address: 5009 HEMINGWAY CIR
City-St-Zip: HAINES CITY, FL 33844 US

Title: MGRM () Delete
Name: DIAZ, JUAN P
Address: 2974 CLIPPER COVE LN APT 102
City-St-Zip: KISSIMMEE, FL 34741 US

Title: MGRM () Delete
Name: GONZALEZ, NICOLAS P
Address: 34 BRADFORD CT
City-St-Zip: KISSIMMEE, FL 34758

Title: MGRM (X) Delete
Name: ABINADER, ANA
Address: 5009 HEMIGWAY CIR
City-St-Zip: HAINES CITY, FL 33844 US

ADDITIONS/CHANGES:

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

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

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

Title: () Change () Addition
Name:
Address:
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: NICOLAS GONZALEZ

MGRM

02/24/2009

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