2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 30, 2008
Secretary of State

DOCUMENT# L07000123587

Entity Name: MAXBEN ESTATE HOLDINGS, " L.L.C"

Current Principal Place of Business:

15021 S.W. 145 CT
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

15021 S.W. 145 CT
MIAMI, FL 33186

New Mailing Address:

FEI Number: 26-1565289 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RAMOS, HERNAN
15021 S.W. 145 CT
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: RAMOS, HERNAN
Address: 15021 S.W. 145 CT
City-St-Zip: MIAMI, FL 33186 FL

Title: MGR ( ) Delete
Name: RAMOS, JULIO
Address: 14373 SW 161 ST
City-St-Zip: MIAMI, FL 33177

Title: MGR ( ) Delete
Name: RAMOS, EDGARDO
Address: 15021 SW 145 CT
City-St-Zip: MIAMI, FL 33186

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:

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: HERNAN RAMOS MGR 07/30/2008

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