

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000025479

FILED
Apr 19, 2009
Secretary of State

Entity Name: ALTERNATIVE PROJECTS LLC

Current Principal Place of Business:

4235 N. UNIVERSITY DRIVE
312
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

4235 N. UNIVERSITY DRIVE
312
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 61-1557741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, SANTIAGO
4235 N UNIVERSITY DRIVE
312
SUNRISE, FL 33351 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: GOMEZ, SANTIAGO
Address: 4235 N UNIVERSITY DRIVE #312
City-St-Zip: SUNRISE, FL 33351

Title: MGRM () Delete
Name: DUPLAT, CAROLINA
Address: 4235 N. UNIVERSITY DR. #312
City-St-Zip: SUNRISE, FL 33351

Title: MGRM () Delete
Name: SIERRA, JUANITA
Address: 4235 N UNIVERSITY DRIVE #312
City-St-Zip: SUNRISE, FL 33351

Title: MGRM () Delete
Name: GOMEZ, HUMBERTO
Address: 3801 SOUTH OCEAN DRIVE #4R
City-St-Zip: SUNRISE, FL 33351

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: MGRM (X) Change () Addition
Name: GOMEZ, HUMBERTO
Address: 10609 PRAIRIE RIDGE LANE
City-St-Zip: CHARLOTTE, NC 28213

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: SANTIAGO GOMEZ

MGR

04/19/2009

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