## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000045496

Entity Name: VILLA DORADA 308 LLC.

FILED Apr 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2121 PONCE DE LEON BLVD 2121 PONCE DE LEON BLVD

STE 240 STE 240

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 US

**Current Mailing Address: New Mailing Address:** 

2121 PONCE DE LEON BLVD 2121 PONCE DE LEON BLVD

STE 240 STE 240

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 US

FEI Number: 75-3268093 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:

PRATS FERNANDEZ & CO PA 2121 PONCE DE LEON BLVD STE 240 CORAL GABLES, FL 33134 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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MRGM ( ) Delete Title: () Change () Addition

JACK TAR CORP. Name: Name: Address: **PANAMA** Address: City-St-Zip: CD. PANAMA REP. PANAMA, PA -----City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: CIVES, JOSE LUIS Name: CIVES, JOSE LUIS

Address: 2121 PONCE DE LEON BLVD 240 Address: 2121 PONCE DE LEON BLVD 240 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 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: JOSE LUIS CIVES **MGRM** 04/14/2009