

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000060606

**FILED**  
**Feb 26, 2009**  
**Secretary of State**

**Entity Name:** MIRANDA SOFIA ENTERPRISES LLC

**Current Principal Place of Business:**

16699 COLLINS AVE.  
#3208  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

16699 COLLINS AVE.  
#3208  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

**FEI Number:** 26-2943416

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DE JESUS, CONSTANCA  
16699 COLLINS AVE.  
#3208  
SUNNY ISLES BEACH, FL 33160 US

**Name and Address of New Registered Agent:**

SILVA'S ENTERPRISE, INC  
5220 S UNIVERSITY DR  
STE C-102  
DAVIE, FL 33328 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:** FERNANDO SILVA

02/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** DE ROMANA LETTS, JOSE ROBERTO  
**Address:** 16699 COLLINS AVE.  
**City-St-Zip:** SUNNY ISLES BEACH, FL 33160

**ADDITIONS/CHANGES:**

**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:** JOSE ROBERTO DE ROMANA LETTS

MGRM

02/26/2009

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