

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096154

Entity Name: DEL SMART SHOP, LLC

FILED
Apr 04, 2009
Secretary of State

Current Principal Place of Business:

15198 SW 56 STREET
MIAMI, FL 33185 US

New Principal Place of Business:

15198 S.W. 56TH STREET
MIAMI, FL 33185 US

Current Mailing Address:

15198 SW 56 STREET
MIAMI, FL 33185 US

New Mailing Address:

15198 S.W. 56TH STREET
MIAMI, FL 33185 US

FEI Number: 26-3544870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLINDRES, GLENDA L
15198 SW 56 STREET
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

COLINDRES, GLENDA
12142 S.W. 251ST STREET
HOMESTEAD, FL 33032 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: GLENDA COLINDRES

04/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLINDRES, GLENDA L
Address: 15198 SW 56 STREET
City-St-Zip: MIAMI, FL 33185 US

Title: MGRM () Delete
Name: LOPEZ, DUWLAV
Address: 15198 SW 56 STREET
City-St-Zip: MIAMI, FL 33185 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLINDRES, GLENDA
Address: 12142 S.W. 251ST STREET
City-St-Zip: HOMESTEAD, FL 33032 US

Title: MGRM (X) Change () Addition
Name: LOPEZ, DUWLAV
Address: 12142 S.W. 251ST STREET
City-St-Zip: HOMESTEAD, FL 33032 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: GLENDA COLINDRES

P

04/04/2009

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