

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000104889

FILED
Jan 10, 2009
Secretary of State

Entity Name: ERRINI GROUP, LLC.

Current Principal Place of Business:

15559 SW 40 STREET
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

15559 SW 40 STREET
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 26-3687462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALAZAR, JUAN
15559 SW 40 STREET
MIRAMAR, FL 33027 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: MGRM () Delete
Name: SALAZAR, JUAN
Address: 15559 SW 40 STREET
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM () Delete
Name: ERRINI, LUIGI
Address: 11455 NW 83 ROAD WAY
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: ERRINI, CARLOS A
Address: 11455 NW 83 ROAD WAY
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: ERRINI, ANTONIO
Address: 11455 NW 83 ROAD WAY
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: DE ERRINI, MARISOL
Address: 11455 NW 83 ROAD WAY
City-St-Zip: DORAL, FL 33178

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: () 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: JUAN SALAZAR

MGR

01/10/2009

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