## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT							. 10 MAY 25 =			
DOCUMENT # L08000111711							10 MAY 25 PM 12: 32			
1. Entity Name SALGON INVESTMENTS LLC						SECRETARY OF STATE ALL AHASSEE, FILORIDE			TATE PRIDE	
Principal Place of Business 16400 NW 59TH AVE MIAMI LAKES, FL 33014 US			Mailing Address 16400 NW 59TH AVE MIAMI LAKES, FL 33014 US			05/25/10-01010-008 ** 138.75				
							#1 1/4 #1 1/4 #1 / 1 #1 / 1 # #1 / 1 # # # # # # # #			
2. Principal Place of Business - No P.O Box # 3. Mailing Address 16400 N.W 59 AVE 16400 N.W 59. AVE .							\$9181 (BIII)   B\${III   BBIII   BBIII			
Suite, Apt.	*, etc. B	ULUING	Suite, Apt #. etc BUILDING.			05122010	Chg-LLC	CR2E083 (11/08)	1	
City & State  MINHI LAKES - FL.			MINHI LAKES. FL.			4. FEI Numb 26-465		<del> }-</del>	pplied For lot Applicable	
Zip <b>33</b> 2			Zp 33014	Coun			of Status Desired	S5.00 Ac Fee Requir		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name										
SALGUEIRO, MIGUEL						P.O. Box Number is Not Acceptable)				
MIAMI LAKES, FL 33014					1640	ON.W.	59 A1	/三·		
City						1 LAKES		FL Zip Cod	101.4	
8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE Signature typed or printed margin of registered/agent and title of applicable (NOTE, Registered Agent signature required when reinstating)  DATE										
FILE NOW!!! FEE IS \$138.75								e check payable to a Department of Sta	te	
9.		MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	/CHANGES		
TITLE	MGRM	EZ, ALBERT	☐ Delete	TITLI	1			☐ Change	Addition	
STREET ADDRESS	16400 NV	59TH AVE		STRE	ET ADDRESS			,		
CITY-ST-ZIP TITLE	MGRM	KES, FL 33014	☐ Delete	TITLE	· ST · ZIP			☐ Change	Addition	
NAME STREET ADDRESS		RO, MIGUEL V 59TH AVE		NAM STRE	E Et adoress				,	
CITY - ST - ZIP	MIAMI LAI	По	CITY	-ST-ZIP	·		Chuses	- Addition		
TITLE NAME					E			☐ Change	Addition	
STREFT ADDRESS CITY-ST-ZIP					ET ADDRESS · ST · ZIP					
TITLE NAME			☐ Delete	TITLE	ľ			Change	Addition	
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST - ZIP					
TITLE		<del></del>	☐ Delete	TITLE	:			☐ Change	Addition	
NAME STREET ADDRESS				NAMI STRE	E Et address					
CITY-ST-ZIP			□ n		- ST - ZIP		<del> </del>	Chan	Addres	
NAME			☐ Delete	NAM	F			□ Change	Addition	
<b>!</b>					ET ADDRESS - ST - ZIP			U		
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the										
limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.										
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  Date  Dayline Phone #										
SIGNATURE AND TYPED OR PENTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Proce #										



FILED

FLORIDA DEPARTMENT OF STATE 10 MAY 25 PM 12: 32
Division of Corporations

SECRETARY OF STATE FALLAHASSEE. FLORIDA

May 14, 2010

SALGON INVESTMENTS LLC 16400 NW 59TH AVE MIAMI LAKES, FL 33014 US

SUBJECT: SALGON INVESTMENTS LLC

Ref. Number: L08000111711

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock

Registration/Qualification Section

Division of Corporations Letter Number: 610A00012217