

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000042425

FILED  
Apr 30, 2010  
Secretary of State

Entity Name: JUNIPER MANAGEMENT (TX), LLC

## Current Principal Place of Business:

% ERNESTO SANCHEZ, P.A.  
1313 PONCE DE LEON BLVD - STE 301  
CORAL GABLES, FL 33134

## New Principal Place of Business:

16047 COLLINS AVENUE  
APT. #601  
SUNNY ISLES, FL 33160

## Current Mailing Address:

% ERNESTO SANCHEZ, P.A.  
1313 PONCE DE LEON BLVD - STE 301  
CORAL GABLES, FL 33134

## New Mailing Address:

C/O ERNESTO SANCHEZ, P.A.  
1313 PONCE DE LEON BLVD - STE 301  
CORAL GABLES, FL 33134

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, ERNESTO ESQ  
% ERNESTO SANCHEZ, P.A.  
1313 PONCE DE LEON BLVD - STE 301  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

ERNESTO SANCHEZ, P.A.  
1313 PONCE DE LEON BLVD.  
SUITE 301  
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: ERNESTO SANCHEZ

04/30/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: FERNANDEZ, ENRIQUE L  
Address: 16047 COLLINS AVENUE, APT. #601  
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR  
Name: LUPORI, MARIA B  
Address: 16047 COLLINS AVENUE, APT. #601  
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR  
Name: FERNANDEZ-LUPORI, MARIA B  
Address: 55 S.E. 6TH STREET, APT. 2308  
City-St-Zip: MIAMI, FL 33131

I hereby 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: ENRIQUE L. FERNANDEZ

MGR

04/30/2010

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