

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 12, 2007 08:00 AM
Secretary of State**

DOCUMENT # L93000000312 1. Entity Name GRECO INDUSTRIES, L.C.	
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Principal Place of Business 7400 SW 107TH AVENUE MIAMI, FL 33173	Mailing Address 7400 SW 107TH AVENUE MIAMI, FL 33173
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0489818	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent GRECO, ERNESTO R 7400 SW 107TH AVENUE MIAMI, FL 33173	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renaming.) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M GRECO, ERNESTO R 7400 SW 107TH AVENUE MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M GRECO, NORBERTO 7400 SW 107TH AVENUE MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M GRECO, RODOLFO 7400 SW 107TH AVENUE MIAMI, FL 33173
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/12/07-80028-025 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **1.5.07** **305.273.8796**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #