

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000391

FILED
May 02, 2007
Secretary of State

Entity Name: MARENGO LIMITED LIABILITY COMPANY, L.C.

Current Principal Place of Business:

11900 W. DIXIE HWY.
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

11900 W. DIXIE HWY.
MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-0676190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

IRIBAR, JORGE
11900 W. DIXIE HWY.
MIAMI, FL 33161 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: MGR () Delete
Name: IRIBAR, MANUEL MD
Address: 5551 HANCOCK ROAD
City-St-Zip: FT. LAUDERDALE, FL 33330

Title: MGR () Delete
Name: IRIBAR, JORGE
Address: 13297 MAJESTIC WAY
City-St-Zip: COOPER CITY, FL 33330

Title: MGR () Delete
Name: OBALLE, FERNANDO
Address: 4223 SW 141 AVENUE
City-St-Zip: DAVIE, FL 33330

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:

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: JORGE IRIBAR

MGR

05/02/2007

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