LIMITED LIABILITY COMPANY ANNUAL REPORT				LORIDA DEPARTMENT OF STATE Sandra B. Mortham			ATE	FILED 98 JUL -7 PM 1: 25			
· ACCC					Secretary of State DIVISION OF CORPORATIONS						
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supple \$188.75 Make Check Payable To: FLORIDA DEPARTMENT							I Fee	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
1. Name of Limit	and Mailing Address led Liability Compar	, DOCU	MENT	# L90	50000	00637					
BOCHIM OIL COMPANY, L.C. 1990 N.W. 82ND AVENUE MIAMI FL 33126							1990 N.W. 82ND AVENUE MIAMI FL 33126				
2. Principal Place of Business 2s. Mallin			ng Address				3. Date Organiz	red or Qualified	3a. State of Formation		
Suite, Apt. #, etc. Suite, Ap			t. #, etc.				06/11/: 4. FEI Number		FL		
City & State City			City & St	State				65-0672490 Applied For Not Applicable			
Z ip	TCo	untry	Ζιρ		Count			5. Date of Last		6. Certificate of Status Desired	
<u>-</u>			<u> </u>					08/29/		SB.75 Additional Fee Required	
7. Name and Address of Current Registered Ager						Name	8. N	lame and Addres	ss of New Regla	tered Agent/Office	
ATRIUM REGISTERED AGENTS, IN 1500 SAN REMO AVENUE SUITE 125 CORAL GABLES FL 33146				Street Address (·	P.O. Box Number is Not Acceptable)			
					City				FL	Zip Code	
its register	ant to the provisions red office or registere red agent, and acce	ed agent, or both, in th	and 608.508 e State of Flo	, Florida Stat rida. Such ch	utes, the at ange was a	oove-named uthorized by	l limited affirmat	liability company i ive vote of a major	submits this state	ement for the purpose of changing s. I hereby accept the appointment	
SIGNATU	RE	Flogistored Agent Accepting	Appaniment) (I	NOTE Booistered	Agent sapatur	n required when	reinstation		DATE		
					Business Street Address				City	, State and Zip Code	
10. Title	l			1	NI W	8 2 NID	AVE	NUE	MIAMI		
10. Title	RINCON,	ROBERTO		1990	14 . 14 .	OZIND			1	FL	
		ROBERTO	L			82ND	AVE	NUE	MIAMI		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER

SIGNATURE: