

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 09, 2005 8:00 am**  
**Secretary of State**

08-09-2005 90054 018 \*\*\*\*50.00

**DOCUMENT # M01000002634**

1. Entity Name  
**AMDX LLC**



Principal Place of Business  
**3075 N.W. 107TH AVE.  
MIAMI, FL 33172**

Mailing Address  
**3075 N.W. 107TH AVE.  
MIAMI, FL 33172**



07012005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1150401**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**FERNANDEZ, ODELIN  
3075 N.W. 107TH AVE.  
MIAMI, FL 33172**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by September 7, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	D
NAME	DE CESPEDES, C.M.
STREET ADDRESS	3075 N.W. 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	DE CESPEDES, J.L.
STREET ADDRESS	3075 N.W. 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	PEREZ, B.J.
STREET ADDRESS	3075 N.W. 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	MGR
NAME	FERNANDEZ, ODELIN
STREET ADDRESS	3075 N.W. 107TH AVE.
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	FERNANDEZ, JORGE R
STREET ADDRESS	3075 N.W. 107TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33172
TITLE	D
NAME	FERNANDEZ, GUILLERMO F
STREET ADDRESS	3075 NW 107TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33172

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*Bertin J. Perez*

*7/5/05*

Date

Daytime Phone # \_\_\_\_\_