

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Mar 02, 2007 08:00 AM
Secretary of State

DOCUMENT # M02000000910

1. Entity Name
LIBERTY POWER CORP, L.L.C.



Principal Place of Business
800 W. CYPRESS CREEK RD., SUITE 330
FORT LAUDERDALE, FL 33309

Mailing Address
800 W. CYPRESS CREEK RD., SUITE 330
FORT LAUDERDALE, FL 33309



02192007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
81-0545785

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

**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 May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME HERNANDEZ, DAVID
STREET ADDRESS 800 W. CYPRESS CREEK RD., SUITE 330
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE MGR
NAME DAIRE, ALBERTO
STREET ADDRESS 800 W. CYPRESS CREEK RD., SUITE 330
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE MGR
NAME HERNANDEZ, ELIEZER
STREET ADDRESS 800 W. CYPRESS CREEK RD., SUITE 330
CITY-ST-ZIP FORT LAUDERDALE, FL 33309

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000654532
03/13/07-80066-010 50.00

**DO NOT WRITE
IN THIS SPACE**

U00000654532
03/13/07-80066-011 5.00

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: _____

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

Alberto Daire

02/28/07

Date

954-598-7003

Daytime Phone #