

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90109 041 \*\*\*\*50.00

**DOCUMENT # M06000004399**

1. Entity Name  
**FIRST CARE COLOMBIA, LLC**



Principal Place of Business  
3325 GRIFFIN RD #210  
FT. LAUDERDALE, FL 33312

Mailing Address  
3325 GRIFFIN RD #210  
FT. LAUDERDALE, FL 33312

**60039360**



01202007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**56-2596539**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

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

AGENTS AND CORPORATIONS, INC.  
773 4TH AVENUE, STE E  
NAPLES, FL 34102

**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 NAME STREET ADDRESS CITY-ST-ZIP	MGR BONACCI, NICHOLAS 3325 GRIFFIN RD #210 FT. LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	m GR Carlos Barragan Kra. 33 #29 Apt. 617 Medellin, COLOMBIA
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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:** *Jesus J. Barragan, President*

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

**APR 5 2007 954 3574255**

Date

Daytime Phone #

Division of Corporations  
PO Box 6198  
Tallahassee, FL 32314

## ATTACHMENT

# 60039360



Dear Secretary of State:

Please find enclosed herewith payment in the amount of \$50 (Fifty Dollars 00/100) for the **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT** for First Care Colombia, LLC **Document #M06000004399.**

Please note the following change for the ADDITION of one MEMBER MANAGER as follows (and as noted on the report):

CARLOS BARRAGAN  
Kra. 33 #29 105 Apt. 617  
Medellin, COLOMBIA

Thank you for your assistance in this matter.

Sincerely,

*Nicholas Bonacci, President*

Nicholas Bonacci, President  
First Care Colombia, LLC  
(954) 357-4255