

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075252

FILED
Feb 03, 2009
Secretary of State

Entity Name: LLINET INC.

Current Principal Place of Business:

15338 SW 39TH ST
DAVIE, FL 33331

New Principal Place of Business:

Current Mailing Address:

15338 SW 39TH ST
DAVIE, FL 33331

New Mailing Address:

FEI Number: 74-3232298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, ALEXANDRA J ESQ
2875 NE 191ST STREET, 801
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

LLINAS, JOSE M
15338 SW 39 TH ST
DAVIE, FL 33331 US

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: JOSE M LLINAS

02/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LLINAS MATAMOROS, JOSE M
Address: 15338 SW 39TH ST
City-St-Zip: DAVIE, FL 33331

Title: D () Delete
Name: NEGRET DE LLINAS, MARIA X
Address: 15338 SW 39TH ST
City-St-Zip: DAVIE, FL 33331

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LLINAS, JOSE M
Address: 15338 SW 39TH ST
City-St-Zip: DAVIE, FL 33331

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: LLINAS, MARIA CATALINA
Address: 15338 SW 39 TH ST
City-St-Zip: DAVIE, FL 33331

Title: D () Change (X) Addition
Name: LLINAS, CARLOS
Address: 15338 SW 39 TH ST
City-St-Zip: DAVIE, FL 33331

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE M LLINAS

D

02/03/2009

Electronic Signature of Signing Officer or Director

Date