

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048200

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: A-1 ANHERMA, LLC

**Current Principal Place of Business:**

15970 WEST STATE RD 84, UNIT 114  
SUNRISE, FL 33326

**New Principal Place of Business:**

15970 WEST STATE RD 84,  
UNIT 114  
SUNRISE, FL 33326

**Current Mailing Address:**

15970 WEST STATE RD 84, UNIT 114  
SUNRISE, FL 33326

**New Mailing Address:**

15970 WEST STATE RD 84,  
UNIT 114  
SUNRISE, FL 33326

FEI Number: 20-2846440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BECERRA, ANDRES  
15970 WEST STATE RD 84, UNIT 114  
SUNRISE, FL 33326 US

**Name and Address of New Registered Agent:**

PRATS FERNANDEZ & CO, PA.  
2121 PONCE DE LEON BLVD  
SUITE 240  
CORAL GABLES, FL 33134 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: GABRIEL PRATS

03/27/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BECERRA, HERNANDO J  
Address: 15970 WEST STATE RD 84, UNIT 114  
City-St-Zip: SUNRISE, FL 33326

Title: MGRM ( ) Delete  
Name: BECERRA, ALICIA  
Address: 15970 WEST STATE RD 84, UNIT 114  
City-St-Zip: SUNRISE, FL 33326

Title: MGRM ( ) Delete  
Name: BECERRA, ANDRES  
Address: 15970 WEST STATE RD 84, UNIT 114  
City-St-Zip: SUNRISE, FL 33326

Title: MGR ( ) Delete  
Name: ANHERMA CORP.,  
Address: 15970 WEST STATE RD 84, UNIT 114  
City-St-Zip: SUNRISE, FL 33326

**ADDITIONS/CHANGES:**

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HERNANDO J. BECERRA

MGRM

03/27/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date