

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048200

FILED
Mar 03, 2009
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:

1820 N. CORPORATE LAKES BLVD
SUITE 103
WESTON, FL 33326 US

Current Mailing Address:

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

New Mailing Address:

1820 N. CORPORATE LAKES BLVD
SUITE 103
WESTON, FL 33326 US

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, HERNANDO J GMGR
15970 WEST STATE RD 84,
UNIT 114
SUNRISE, FL 33326 US

Name and Address of New Registered Agent:

BECERRA, HERNANDO J GMGR
1820 N. CORPORATE LAKES BLVD
SUITE 103
WESTON, FL 33326 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: HERNANDO BECERRA

03/03/2009

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: MGRM (X) Change () Addition
Name: BECERRA, HERNANDO J MGR
Address: 1820 N. CORPORATE LAKES BLVD SUITE 103
City-St-Zip: WESTON, FL 33326 US

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

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

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

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 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 BECERRA

MGR

03/03/2009

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