

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000015755

1. Entity Name
COUNTRY REAL ESTATE INVESTMENTS, LLC



Principal Place of Business
**7300 SW 100TH COURT
MIAMI, FL 33173**

Mailing Address
**7300 SW 100TH COURT
MIAMI, FL 33173**



01102007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 01-0728033	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**ALVARO CASTILLO B., P.A.
1390 BRICKELL AVENUE, SUITE 200
MIAMI, FL 33131**

**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 COUNTRY USA, INC. 7300 SW 100TH COURT MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VALENZUELA, PATRICIO 3440 HOLLYWOOD BOULEVARD, SUITE 360 HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS LEPRE, HUGO 7300 SW 100TH CT MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT MANGUPLI, LUIS 7300 SW 100TH CT MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: **X**

HUGO LEPRE, MGR.

4/03/07

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

Date

Daytime Phone #