

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015885

FILED
Apr 29, 2005
Secretary of State

Entity Name: SOBE DEVELOPMENT, L.C.

Current Principal Place of Business:

801 BRICKELL AVE, 1580
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

801 BRICKELL AVE, 1580
MIAMI, FL 33131

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NS CORPORATE SERVICES INC.
801 BRICKELL AVE, 1580
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LATTES, JEAN CLAUDE
Address: 810 7TH STREET
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: FERRERO, ADOLPHE
Address: 801 BRICKELL AVE, 1580
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: DAHAN, HENRY
Address: 801 BRICKELL AVE, 1580
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: MONIOT, COLETTE MARIE
Address: 801 BRICKELL AVE, 1580
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: GIGLIO, ROBERT
Address: 801 BRICKELL AVE, 1580
City-St-Zip: MIAMI, FL 33131

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:

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 Section 119.07(3)(i), 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: JEAN LATTES

MGR

04/29/2005

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