

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027265

**FILED**  
**May 31, 2005**  
**Secretary of State**

**Entity Name:** 1528-1650 BRICKELL AVE. LOFTS VENTURE, LLC.

**Current Principal Place of Business:**

1110 BRICKELL AVENUE, #804  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1110 BRICKELL AVENUE, #804  
MIAMI, FL 33131

**New Mailing Address:**

**FEI Number:** 33-1026677      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

OMEGA ALPHA ENGINEER USA CORP.  
1110 BRICKELL AVENUE, #804  
MIAMI, FL 33131    US

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

OMEGA ALPHA ENGINEERING USA CORP.  
1110 BRICKELL AVENUE, #804  
MIAMI, FL 33131    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: ALFREDO ACOSTA

05/31/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: OMEGA ALPHA ENGINEER, USA CORP.  
Address: 1110 BRICKELL AVENUE, STE 804  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: OMEGA ALPHA ENGINEER, ING USA CORP.  
Address: 1110 BRICKELL AVENUE, STE 804  
City-St-Zip: MIAMI, FL 33131

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: ALFREDO ACOSTA

PD

05/31/2005

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