

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004559

FILED  
Feb 28, 2008  
Secretary of State

Entity Name: 1907 OCEAN ONE, LLC

**Current Principal Place of Business:**

19333 COLLINS AVENUE  
UNIT 1907  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MONAHAN  
4000 PONCE DE LEON BLVD, SUITE 470 #5  
CORAL GABLES, FL 33146

**New Mailing Address:**

C/O MONAHAN  
4000 PONCE DE LEON BLVD, SUITE 470 #13  
CORAL GABLES, FL 33146

FEI Number: 98-0519188

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONAHAN, ROARK R CPA  
4000 PONCE DE LEON BLVD  
SUITE 470 OFFICE NUMBER 5  
CORAL GABLES, FL 33146 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TOLEDANO, JACOBO  
Address: 19333 COLLINS AVENUE - UNIT 1907  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGRM ( ) Delete  
Name: TOLEDANO, FORTUNA FREWA  
Address: 19333 COLLINS AVENUE - UNIT 1907  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

**ADDITIONS/CHANGES:**

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 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: JACOBO TOLEDANO

MGRM

02/28/2008

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