


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000040282 1. Entity Name OPRE, LLC	
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Principal Place of Business C/O ALAN J. MARCUS 20803 BISCAYNE BLVD., STE. 301 AVENTURA, FL 33180	Mailing Address C/O ALAN J. MARCUS 20803 BISCAYNE BLVD., STE. 301 AVENTURA, FL 33180
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02242007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FE# Number 20-1866043	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, MICHAEL
1805 NE 118 ROAD
NORTH MIAMI, FL 33781

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2007

U00000654746
03/13/07-80073-014 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTINEZ, MICHAEL 1805 N.E. 118TH ROAD NORTH MIAMI, FL 33181
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DO NOT WRITE 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:  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #