

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077941

FILED  
May 03, 2005  
Secretary of State

Entity Name: LIGHTPOINT INVESTMENTS, LLC

**Current Principal Place of Business:**

625 JERONIMO DRIVE  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

625 JERONIMO DRIVE  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 20-1922630      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:**

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

KOCH, PAUL  
625 JERONIMO DRIVE  
CORAL GABLES, FL 33146      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM      ( ) Delete  
Name: KOCH, PAUL  
Address: 625 JERONIMO DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM      ( ) Delete  
Name: FRANCINI, SANDRO  
Address: 625 JERONIMO DRIVE  
City-St-Zip: CORAL GABLES, FL 33146

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      ( ) Change (X) Addition  
Name: LOUIS, JONATHAN D  
Address: 4800 N. FEDERAL HIGHWAY STE 300-D  
City-St-Zip: BOCA RATON, FL 33432

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: JONATHAN LOUIS

MGRM

05/03/2005

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