


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L05000067056 1. Entity Name MIRACLE MILE SOUTH, LLC	
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Principal Place of Business C/O KERDK REAL ESTATE 2631 PONCE DE LEON BLVD. CORAL GABLES, FL 33134	Mailing Address C/O KERDK REAL ESTATE 2631 PONCE DE LEON BLVD. CORAL GABLES, FL 33134
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3163669	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

OTERO, JORGE E
 75 VALENCIA AVE., SUITE 200
 CORAL GABLES, FL 33134

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee Is \$50.00
Due by May 1, 2007**

U00000657279
03/14/07-80055-019 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME	MGRM VARA, ADALBERTO
STREET ADDRESS CITY-ST-ZIP	9475 N.W. 89 AVENUE MEDLEY, FL 33178
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	

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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

3/1/07

305-446-2586

Date Daytime Phone #