

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000090865

FILED
Jun 02, 2006
Secretary of State

Entity Name: STERLING INTERNATIONAL PROPERTIES, LLC

Current Principal Place of Business:

2601 S. BAYSHORE DR., SUITE 1000
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2601 S. BAYSHORE DR., SUITE 1000
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-3476832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPOTE, NIBALDO J
2601 S. BAYSHORE DR., SUITE 1000
MIAMI, FL 33133 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: DP () Delete
Name: BEMELLO, WILLY A
Address: 2601 S BAYSHORE DR., SUITE 1000
City-St-Zip: MIAMI, FL 33133

Title: VP () Delete
Name: MORELLO, HILDA
Address: 422 SANSOBINO AVE
City-St-Zip: CORAL GABLES, FL 33146

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

ADDITIONS/CHANGES:

Title: DP (X) Change () Addition
Name: AJAMIL, LUIS
Address: 2601 S BAYSHORE DR., SUITE 1000
City-St-Zip: MIAMI, FL 33133

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

Title: MGR () Change (X) Addition
Name: MORELLO, HILDA
Address: 422 SANSOBINO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the 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: HILDA MORELLO

MGR

06/02/2006

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