2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Nov 16, 2006
Secretary of State

DOCUMENT# L05000090865

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 (X) Delete
Name: AJAMIL, LUIS
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: MGR ( ) Delete
Name: MORELLO, HILDA
Address: 422 SANSOBINO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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

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

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 P 11/16/2006

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