## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000100835

1. Entity Name

1146 HIGHLAND PARK, LLC

FILED
May 03, 2007 08:00 A
Secretary of State

Principal Place of Business

1501 NW 13 COURT MIAMI, FL 33125 Mailing Address

1501 NW 13 COURT MIAMI, FL 33125



## DO NOT WRITE IN THIS SPACE

04162007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3647855

4/30/2007

305-545-6401

Daytime Phone #

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CUEVAS & ORTIZ, P.A. 536 BILTMORE WAY CORAL GABLES, FL 33134

SIGNATURE:

SIGNATURE AND TYPED OR PE

## 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. Tam familiar with, and accept the obligations of registered agent. SIGNATURE			
Signature, typed or printed name of registered agent and bite if epplicable (NOTE: Registered Agent signature required when reinstating)  DATE  Filling Fee is \$50.00			
Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO CARDENAS, LUIS 18911 COLLINS AVE # 405 SUNNY ISLES BEACH, FL 33160		e e e e e e e e e e e e e e e e e e e
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000753318 05/24/07-80061-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		,	NOT WRITE THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			INIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-2IP		i	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report to 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

ANTONIO GASTELBONDO

NIZE NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE