## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L06000010556

1. Entity Name

CORAL REEF MUTUAL INVESTMENTS. LLC



Principal Place of Business

1541 BRICKELL AVENUE

#A3801 MIAMI, FL 33129 US Mailing Address

1541 BRICKELL AVENUE #A3801

MIAMI, FL 33129

**FILED** Apr 29, 2008 08:00 AN Secretary of State



02232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4338193 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MANAGING MEMBERS/MANAGERS

BRANT, BARRY M CPA 200 SOUTH BISCAYNE BLVD. SIXTH FLOOR MIAMI, FL 33131

SIGNATURE

9.

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# 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.	
	the obligations of registered agent.	

(NOTE: Registered Agent signature required when reinstating)

### FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

**MGRM** TITLE NAME MARTINS, DAVID STREET ADDRESS 1541 BRICKELL AVENUE, #A3801 CITY-ST-7iP MIAMI, FL 33129 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

DO NOT WRITE IN THIS SPACE

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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE A