2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 21, 2008 08:00 A Secretary of State

1. Entity Nam	MEN # L06000020	111		Secretary or S
Principal Place of Business 8360 WEST FLAGLER STREET, SUITE #200 MIAMI, FL 33144 2. Principal Place of Business - No P.O. Box #		Mailing Address 8360 WEST FLAGLER STREET, SUITE #200 MIAMI, FL 33144 3. Mailing Address		
City & State		City & State		4. FEI Number Applied For APPLIED FOR Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S5.00 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered Agent
OLIWKOWICZ, LEON			Name	
8360 WEST FLAGLER STREET, SUITE MIAMI, FL 33144		‡200	Street Address	s (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
8. The above	named entity submits this statement for	the purpose of changing its	registered office or regist	tered agent, or both, in the State of Florida. I am familiar with, and accept
the obligati	ions of registered agent.	, , , ,	· ·	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable (NOT	E: Registered Agent signature requi	DATE DATE
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			Make check payable to Florida Department of State
9.	MANAGING MEMBEI		10.	ADDITIONS/CHANGES
NAME STREET ADDRESS CITY-ST-ZIP	MGRM OLIWKOWICZ, LEON 8360 WEST FLAGLER STREET, MIAMI, FL 33144	□ Delete SUITE #200	TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Change □ Addrio U00000908811 05/06/08-80044-016 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio
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TITLE HAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
indicated	on this report is true and accurate and bility company or the receiver or trustee	that my signature shall have	the same legal effect as if	In the control of th