## 2006 LIMITED LIABILITY COMPANY

## **ANNUAL REPORT**

## **Secretary of State** 02-06-2006 90169 021 \*\*\*\*50.00 **DOCUMENT # L00000011054** 121 ÁLHAMBRA TOWER, L.L.C. Mailing Address Principal Place of Business 121 ALHAMBRA PLAZA 121 ALHAMBRA PLAZA 20005103 PENTHOUSE 1, SUITE 1600 PENTHOUSE 1, SUITE 1600 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 01272006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 59-2447212 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RENTZ R LARRY Street Address (P.O. Box Number is Not Acceptable) 121 ALHAMBRA PLAZA PENTHOUSE 1, SUITE 1600 CORAL GABLES, FL 33134 City Zip Code 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. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGR TITLE TITLE ☐ Change Addition MORRIS, W. ALLEN NAME NAME 121 ALHAMBRA PLAZA, PH I, SUITE 1600 STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP MGR TITE ☐ Delete FITLE ☐ Change ☐ Addition GIL, YAZMIN 121 ALHAMBRA PLAZA, PH I, SUITE 1600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP MGR ☐ Delete ☐ Change ☐ Addition GRAHAM, DALE I. NAME NAME STREET ADDRESS 121 ALHAMBRA PLAZA, PH I, SUITE 1600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES, FL 33134 MGR ☐ Delete TITLE ☐ Change TITLE ☐ Addition RENTZ, R. LARRY NAME 121 ALHAMBRA PLAZA, PH I, SUITE 1600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 CITY-ST-ZIP Delete MGR TITLE ☐ Change ☐ Addition TITLE WEST, MACDONALD NAME NAME 121 ALHAMBRA PLAZA, PH I, SUITE 1600 STREET ADDRESS STREET ADDRESS

FILED Feb 06, 2006 8:00 am

☐ Addition

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.

☐ Defete

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

CORAL GABLES, FL 33134

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

305-443-1000 armin SIGNATURE: PED OR PRINTED NAME OF SIGNING MANAGING OR AUTHORIZED REPRESENTATIVE