

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074037

FILED  
Apr 18, 2006  
Secretary of State

Entity Name: ICC III - INTERNATIONAL CORPORATE CENTER, LLC

**Current Principal Place of Business:**

150 ALHAMBRA CIRCLE, SUITE 800  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

150 ALHAMBRA CIRCLE, SUITE 800  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 56-2544532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LARREO & ORTEGA  
150 ALHAMBRA CIRCLE, SUITE 950  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

S & K PROPERTY MANAGEMENT, LLC  
150 ALHAMBRA CIRCLE, SUITE 800  
CORAL GABLES, FL 33134 US

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: LIDIA CARTAYA

04/18/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CARTAYA, LIDIA  
Address: 150 ALHAMBRA CIRCLE, SUITE 800  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete  
Name: KUCZURBA, DIRK  
Address: 150 ALHAMBRA CIRCLE, SUITE 800  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

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

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: LIDIA CARTAYA

MGR

04/18/2006

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