2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# L06000060478

Entity Name: JER LAND, LLC

Current Principal Place of Business:

C/O 1390 BRICKELL AVENUE, SUITE 200
MIAMI, FL 33131

New Principal Place of Business:

1110 BRICKELL AVE., SUITE 412
MIAMI, FL 33131

Current Mailing Address:

C/O 1390 BRICKELL AVENUE, SUITE 200
MIAMI, FL 33131

New Mailing Address:

1110 BRICKELL AVE., SUITE 412
MIAMI, FL 33131

FEI Number: 20-5070168 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASTILLO, ALVARO B P.A.
1390 BRICKELL AVENUE, SUITE 200
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HIRSCHFIELD, JERONIMO
Address: C/O 1390 BRICKELL AVENUE, SUITE 200
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete
Name: HIRSCHFIELD, JULIO
Address: C/O 1390 BRICKELL AVENUE, SUITE 200
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ONE REAL ESTATE INVE, STMENT, INC.
Address: 1110 BRICKELL AVE., SUITE 412
City-St-Zip: MIAMI, FL 33131

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

I hereby certify that the information supplied with this filing does not qualify 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: JERONIMO HIRSCHFELD MGR 04/27/2007

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