


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000010340					
1. Entity Name SANIRENT FLORIDA LLC					
Principal Place of Business 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133			Mailing Address 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 42-1535607	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WORLD CORPORATE SERVICES, INC. 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133			Name Street Address (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 registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAEZ GOMEZ, MAURICIO 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HEGEWISCH, GUSTAVO 2665 SOUTH BAYSHORE DRIVE, STE. 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARVIZU, ERENDIRA 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PASQUEL, JAVIER 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133	<input type="checkbox"/> Delete			
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.			000103219820 05/24/07--01033--008 **900.00		
SIGNATURE: <i>Timothy D. Richards</i>			Date: 4/27/07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Daytime Phone # (305) 858-9900		

FILED

07 JUN 13 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04272007 Chg-LLC CR2E083 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (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 registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$50.00 Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR BAEZ GOMEZ, MAURICIO 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR HEGEWISCH, GUSTAVO 2665 SOUTH BAYSHORE DRIVE, STE. 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR ARVIZU, ERENDIRA 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR PASQUEL, JAVIER 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR PASQUEL, JAVIER 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR PASQUEL, JAVIER 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR PASQUEL, JAVIER 2665 SOUTH BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MGR LOPEZ, RAUL 2665 S. BAYSHORE DRIVE, SUITE 703 MIAMI, FL 33133

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP