

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010374

Entity Name: QUASADI III, LLC

FILED
Aug 10, 2007
Secretary of State

Current Principal Place of Business:

12534 SW 120 STREET
#A- 8
MIAMI, FL 33186

New Principal Place of Business:

New Mailing Address:

1504 ALTON RD
MIAMI BEACH, FL 33139

Current Mailing Address:

755 W 41ST
MIAMI BEACH, FL 33140

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SAWANI, ASAD
755 W 41ST
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

SAWANI, ASAD
1504 ALTON RD
MIAMI BEACH, FL 33139 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:

08/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SAWANI, ASAD
Address: 755 W 41ST
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGRM () Delete
Name: MUHAMED, SADIQ
Address: 755 W 41ST
City-St-Zip: MIAMI BEACH, FL 33140 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SAWANI, ASAD
Address: 1504 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM (X) Change () Addition
Name: MUHAMED, SADIQ
Address: 1504 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139 US

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: ASAD SAWANI

MGRM

08/10/2007

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