2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# L07000123974

Entity Name: MIRAMAR APARTMENTS, LLC

Current Principal Place of Business:

396 ALHAMBRA CIRCLE
SUITE 210
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

396 ALHAMBRA CIRCLE
SUITE 210
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 26-1692994 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOMEZ, TANIA M
396 ALHAMBRA CIRCLE
SUITE 210
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GOMEZ-RESTREPO, TANIA M
396 ALHAMBRA CIRCLE
SUITE 210
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: TANIA M. GOMEZ-RESTREPO 01/07/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GOMEZ, TANIA M
Address: 396 ALHAMBRA CIRCLE, SUITE 210
City-St-Zip: CORAL GABLES, FL 33134 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: GOMEZ-RESTREPO, TANIA M
Address: 396 ALHAMBRA CIRCLE, SUITE 210
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM ( ) Change (X) Addition
Name: RESTREPO, DIEGO L
Address: 396 ALHAMBRA CIRCLE, SUITE 210
City-St-Zip: CORAL GABLES, FL 33134 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: TANIA M GOMEZ-RESTREPO MGRM 01/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date