2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056415

ENGLER, SIMON

ATLANTA, GA 30328 US

6085 LAKE FORREST DRIVE, STE 300-D

Name:

Address:

City-St-Zip:

Entity Name: QUAIL ROOST PARTNERS, LLC

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
	XIE HIGHWAY	,			
SUITE 148 MIAMI, FL					
·			N 88 'II' A I		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
9350 S. DIXIE HIGHWAY BUITE 1480					
MIAMI, FL	33156 US				
FEI Number:	: 26-0274588	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
REGISTERED AGENT CORPORATE SERVICES, INC. 806 DOUGLAS ROAD SUITE 580 CORAL GABLES, FL 33134 US			355 ALHAMBRA (SUITE 801	REGISTERED AGENT CORPORATE SERVICES, INC. 355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 US	
	e of Florida.	submits this statement for the p	urpose of changing its regis	stered office or registered agent, or both 01/08/2008	
OIOINATOI		ic Signature of Registered Age	ent .	Date	
WANAGING	MEMBERS/MANA	AGERS:	ADDITIONS/CHANGE	:S:	
Title: Name: Address: City-St-Zip:	GARCIA, GEÑA	HIGHWAY, SUITE 208	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SANCHEZ, ALE	HIGHWAY, SUITE 1480	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GUNTHERT, G	RREST DRIVE, STE 300-D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	MGR (Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALEJANDRO G. SANCHEZ MGRM 01/08/2008