2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000022213

1. Entity Name
2250 CORAL WAY, LLC

Principal Place of Business	Mailing Address
2000 S. DIXIE HIGHWAY, SUITE 100 MIAMI, FL 33133	2000 S. DIXIE HIGHWAY, SUITE 100 MIAMI, FL 33133

02132008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1160030
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE, SUITE 601
CORAL GABLES, FL 33134

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000839141
03/05/08-80053-014 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ABBASSI, KATAYOUN
STREET ADDRESS	2000 S. DIXIE HIGHWAY, STE 100
CITY-ST-ZIP	MIAMI, FL 33133
TITLE	MGRM
NAME	AGHA, ABDUL DR
STREET ADDRESS	6701 SUNSET DR, STE 203 B
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	MGRM
NAME	GOLKAR, REZA DR
STREET ADDRESS	1643 BRICKELL AVE, # 705
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	MGR
NAME	ABBASSI, MICHAEL
STREET ADDRESS	2000 SOUTH DIXIE HWY SUITE 100
CITY-ST-ZIP	MIAMI, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: Reza R. Golkar R. Golkar 2.21.08 305-856 5858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #