2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# L08000022819

Entity Name: TRG COLOMBIA I, LLC

Current Principal Place of Business:

C/O THE RELATED GROUP
315 S. BISCAYNE BLVD.
MIAMI, FL 33131

New Principal Place of Business:

C/O THE RELATED GROUP
315 S. BISCAYNE BLVD, 3RD FLOOR
MIAMI, FL 33131

Current Mailing Address:

C/O THE RELATED GROUP
315 S. BISCAYNE BLVD.
MIAMI, FL 33131

New Mailing Address:

C/O THE RELATED GROUP
315 S. BISCAYNE BLVD, 3RD FLOOR
MIAMI, FL 33131

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD, #221-E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD, #221 E
PALM BEACH GARDENS, FL 33410 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: VALERIE HAWK, SPECIAL SECRETARY 04/22/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: RELATED INTERNATIONAL, LLC
Address: 315 S BISCAYNE BLVD 3RD FLOOR
City-St-Zip: MIAMI, FL 33131

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: JORGE PEREZ, BY V.HAWK AS ATTY-IN-FACT P 04/22/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date