

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031824

FILED
Apr 29, 2009
Secretary of State

Entity Name: SKYLINE REALTY INTERNATIONAL, LLC

Current Principal Place of Business:

800 BRICKELL AVENUE SUITE 201
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

800 BRICKELL AVENUE SUITE 201
MIAMI, FL 33131

New Mailing Address:

FEI Number: 06-1723384

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONROE, EVANGELINE
800 BRICKELL AVENUE SUITE 201
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

GOULETAS, EVANGELINE PRES
800 BRICKELL AVENUE SUITE 201
MIAMI, FL 33131 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: EVANGELINE GOULETAS

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GOULETAS, EVANGELINE PRES
Address: 2127 BRICKELL AVENUE UNIT 1603
City-St-Zip: MIAMI, FL 33129

Title: MGR () Delete
Name: VAYANOS, STYLIANOS G
Address: 800 BRICKELL AVENUE, SUITE 201
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GOULETAS, EVANGELINE PRES
Address: 800 BRICKELL AVE, SUITE 201
City-St-Zip: MIAMI, FL 33131

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EVANGELINE GOULETAS

MGRM

04/29/2009

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