2007 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # L00000002190

COLÍBRI PROPERTIES, LLC



03-09-2007 90136 012 ****50.00

Secretary of State

FILED

Mar 09, 2007 8:00 am

Principal Place of Business

8788 S.W. 8TH STREET MIAMI, FL 33174-3201 Mailing Address

8788 S.W. 8TH STREET MIAMI, FL 33174-3201



02232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 52-2243717

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COMPANY MGMT SVCS, LLC 8788 SW 8TH ST MIAMI, FL 33174-3201

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·			IN THIS SPACE
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 Fiorida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or protect name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$50.00 Due by May 1, 2007			
9	, MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAGLIERY, SERGIO A 8788 SW 8TH ST MIAMI, FL 331743201		
NAME / STREET ADDRESS CITY-ST-ZIP	***		
NAME STREET ADDRESS CITY-ST-ZIP	,		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

11. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE