#### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L00000005477** 

1. Entity Name 1530 COLLINS FUNDING, LLC



Principal Place of Business

GERALD KATCHER 1111 BRICKELL AVE STE 2920 MIAMI, FL 33131 Mailing Address

1111 BRICKELL AVE STE 2920 MIAMI, FL 33130 FILED Jan 18, 2007 08:00 AM Secretary of State



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01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 12-4142227 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KATCHER, GERALD MELLON UNITED NATIONAL BANK BUILDING 1111 BRICKELL AVE STE 2920 MIAMI, FL 33131

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|           | Signature, typed or printed name of registered agent and title if applicable                      | (NOTE, Registered Agent signature required when remetating)                   | DATE                               |  |
|-----------|---|---|------------------------------------|--|
| SIGNATURE |   |   |                                    |  |
|           | ove named entity submits this statement for the purpose of changi<br>gations of registered agent. | ing its registered office or registered agent, or both, in the State of Flori | da. I am familiar with, and accept |  |

#### Filing Fee is \$50.00 Due by May 1, 2007

| 9.   | MANAGING MEMBERS/MANAGERS                                       |
|--|---|
| NAME STREET ADDRESS CITY-ST-ZIP                | MGRD<br>KATCHER, GERALD<br>1111 BRICKELL AVE<br>MIAMI, FL 33131 |
| NAME STREET ADDRESS CITY-ST-ZIP                |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY+ST-ZIP |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   |

U00000590518 01/18/07-80058-023 50.00

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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 firmited 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

1/8/07 305-376-2445°