


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 14, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L00000010251	
1. Entity Name THE COLLECTION LLC	

Principal Place of Business 200 BIRD ROAD CORAL GABLES, FL 33146	Mailing Address 200 BIRD ROAD CORAL GABLES, FL 33146
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DO NOT WRITE IN THIS SPACE



4. FEI Number 65-1035297	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARKS, EVAN R  
INTERNATIONAL PLACE  
100 S.E. 2ND STREET, SUITE 2700  
MIAMI, FL 33131

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$338.75**

U000000858543  
04/01/08-80049-007 150.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES GORIN, KENNETH T PRES 10000 SW 60 ST MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPRE RUSTIN, LAWRENCE H VPRES 445 GRAND BAY DR #1203 MIAMI, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT RUSTIN, LAWRENCE H SECT 445 GRAND BAY DR #1203 MIAMI, FL 33149
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA MURPHY, ART 1024 CASTILLE AVE CORAL GABLES, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COLOMBO, UGO MGR 701 BRICKELL AVE #3150 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Lawrence Rustin      Date: 3/6/08      Daytime Phone #: 305-446-5885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #