2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 14, 2008 08:00 AM Secretary of State

| ANNUAL REPORT | | | | Secretary of Sta | |
|--|--|---|--|---|--|
| | MENT # L000000132 | 245 | | | · |
| 1. Entity Name DADE PINE PARTNERS LLC | | | | | |
| | | | | | |
| Principal Plac | e of Business | Mailing Address | | | |
| 7236 SW 56TH AVE | | 3272 MATILDA ST | | | |
| MIAMI, FL 3 | 3143 | COCONUT GROVE, FL 33133 | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ern wwer grow right gant Bit St Bill St til 1851 |
| | "有"不能"(1918) (A. A. A. A. A. B. M. A. A. | ,1 ^ , | qu- ' | | |
| | | | . Joseph | , | |
| | ANOTAIDITE | IN THIS COA | | 01102008No Chg-LLC | CR2E083 (12/07) |
| | O NOT WRITE | III II IIIO OFA | OE FRANK | 4. FEI Number 65-1050533 | Applied For Not Applicable |
| | | | | Certificate of Status Desired | \$5.00 Additional |
| 2.57 .217 | 6. Name and Address of Current R | | 1 | | Fee Required |
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| STONE, A | (DELE I ESQUIRE SON, DINER, STONE, PLOUCH | A ET AL. | 194 194 195 195 195 195 195 195 195 195 195 195 | DO NOT W | RITE |
| 1 FINANCIAL PLAZA SUITE 1400 FT. LAUDERDALE, FL 33394 | | | | IN THIS SI | PACE |
| 11. 5.00 | ENDALL, I'L 00004 | | | | ota e je za Kanana koja e je |
| \$ The above | named entity submits this statement for | he ourrose of changing its register | ed office or register | red agent, or both, in the State of F | lorida. I am familiar with and accept |
| | tions of registered agent. | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agent an | d title if applicable. (NOTE: Registers | id Agent signature required | i when reinstating) | DATE |
| FILI After May | E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75 | | | | |
| 9. | MANAGING MEMBER | S (MANAGERS | 1 La 12 12 15 15 | ************************************** | STATE OF ST |
| TITLE | MGRM | O/MANAGENO | | | |
| NAME | ADAMS, MAURICE | | | | |
| STREET ADDRESS CITY-ST-ZIP | 3272 MATILDA STREET COCONUT GROVE, FL 33133 | | | | |
| TITLE | MGRM | | | | 0783327 |
| NAME | ADAMS, ELIZABETH G | | | U17 10AUG | -80009-023 138.75 |
| STREET ADDRESS | 3272 MATILDA STREET | | me and a second | | |
| CITY-ST-ZIP | COCONUT GROVE, FL 33133 | | | | |
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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 limited liability company or the security for execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY+ST-ZIP

ATURE: 10 08 3054797069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Da