2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 21, 2008 08:00 Al Secretary of State

DOCUMENT # L01000 1. Enlity Name KORESHAN LLC	000834
Principal Place of Business 255 ALHAMBRA CIRCLE, SUITE 325 MIAMI, FL 33134	Mailing Address 255 ALHAMBRA CIRCLE, SUITE 325 MIAMI, FL 33134



DO NOT WRITE IN THIS SPACE

04152008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LANGLEY, MARCIA H C/O GREENBERG TRAURIG ONE BOCA PLACE STE 419A BOCA RATON, FL 33431

limited liability company or the receiver or trustee er

SIGNATURE AND TYPE

RINTED HAME OF SIGNING MANAGING MEMBER, O

SIGNATURE:

DO NOT WRITE 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 Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		000000913056 05/07/08-80104-025 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUTHERFORD, J. LARRY 255 ALHAMBRA CIR. STE. 325 MIAMI, FL 33134	:	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE : NAME STREET ADDRESS CITY-ST-ZIP			
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			

to execute this report as required by Chapter 608, Florida Statutes.

AUTHORIZED REPRESENTATIVE

16-08