

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002427

FILED
Apr 27, 2009
Secretary of State

Entity Name: MASHTA PROPERTIES, L.C.

Current Principal Place of Business:

287 W MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Principal Place of Business:

819 HARBOR DRIVE
KEY BISCAYNE, FL 33149

Current Mailing Address:

287 W MASHTA DRIVE
KEY BISCAYNE, FL 33149

New Mailing Address:

819 HARBOR DRIVE
KEY BISCAYNE, FL 33149

FEI Number: 65-1103918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSALES, XAVIER F
287 W MASHTA DR
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

ROSALES, XAVIER F
819 HARBOR DR DR
KEY BISCAYNE, FL 33149 US

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.

SIGNATURE:

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MASHTA PROPERTIES, LTD.
Address: P.O. BOX 4911588
City-St-Zip: KEY BISCAYNE, FL 33149

Title: P () Delete
Name: ROSALES, XAVIER
Address: 287 WEST MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: V () Delete
Name: ROSALES, VANESSA
Address: 287 WEST MASHTA DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ROSALES, XAVIER
Address: 819 HARBOR DR
City-St-Zip: KEY BISCAYNE, FL 33149

Title: V (X) Change () Addition
Name: ROSALES, VANESSA
Address: 819 HARBOR DR
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: XAVIER F ROSALES

P

04/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date