

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003549

FILED
Feb 26, 2007
Secretary of State

Entity Name: CARIBBEAN RESORTS BY LACONM, L.L.C.

Current Principal Place of Business:

P.O.BOX 14784
FORT LAUDERDALE, FL 33302

New Principal Place of Business:

305 S ANDREWS AVE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

P.O.BOX 14784
FORT LAUDERDALE, FL 33302

New Mailing Address:

FEI Number: 65-1091046 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

IGLESIAS, VIRGINIA
305 S ANDREWS AVE
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: IGLESIAS, VIRGINIA
Address: P.O.BOX 14784
City-St-Zip: FORT LAUDERDALE, FL 33302

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: VIRGINIA IGLESIAS

MGR

02/26/2007

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