

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005454

Entity Name: SAPPHIRE HOMES LLC

FILED
May 05, 2007
Secretary of State

Current Principal Place of Business:

633NE 167TH STREET
SUITE 806
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

633NE 167TH STREET
SUITE 806
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 31-1794440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NICOLEAU, MICHAEL
633NE 167TH STREET
SUITE 806
NORTH MIAMI BEACH, FL 33162 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: M () Delete
Name: NICOLEAU, RAYNETTE
Address: 633NE 167TH STREET SUITE 806
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: MGRM () Delete
Name: NICOLEAU, MICHAEL
Address: 633NE 167TH STREET SUITE 806
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NICOLEAU, RAYNETTE
Address: 633NE 167TH STREET SUITE 806
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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

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: MICHAEL NICOLEAU

MGRM

05/05/2007

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