

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005497

FILED
Apr 30, 2007
Secretary of State

Entity Name: DORAL POINTE LLC

Current Principal Place of Business:

1320 S. DIXIE HWY
214
CORAL GABLES, FL 331462951 US

New Principal Place of Business:

Current Mailing Address:

1320 S. DIXIE HWY
214
CORAL GABLES, FL 331462951 US

New Mailing Address:

FEI Number: 65-1139065 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MURAI WALD BIONDO & MORENO, P.A.
25 S.E. 2ND AVENUE
SUITE 900
MIAMI, FL 33131 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: FRAGA, ALBERT J
Address: 1320 S. DIXIE HWY., STE. 214
City-St-Zip: CORAL GABLES, FL 331462951 US

Title: MGRM () Delete
Name: FRAGA, ANTONIO C
Address: 1320 S. DIXIE HWY., STE. 214
City-St-Zip: CORAL GABLES, FL 331462951 US

ADDITIONS/CHANGES:

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

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: ALBERT J FRAGA

MGR

04/30/2007

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