

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006141

Entity Name: RANCHO BAY, L.L.C.

FILED
Mar 05, 2007
Secretary of State

Current Principal Place of Business:

4000 PONCE DE LEON BLVD.
SUITE 470
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4114 CARRIAGE DRIVE
#N1
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 75-3040547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CABRERA, JUAN J
4000 PONCE DE LEON BLVD.
SUITE 470
CORAL GABLES, FL 33146 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: CABRERA, JUAN J
Address: 4000 PONCE DE LEON BLVD. - SUITE 470
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: CAMPINS, MARIA A
Address: 4000 PONCE DE LEON BLVD. - SUITE 470
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: UPEGUI, SANDRA
Address: 4000 PONCE DE LEON BLVD. - SUITE 470
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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 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: JUAN J CABRERA

MGR

03/05/2007

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