

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000021118
 1. Entity Name
 8510, LLC



Principal Place of Business: 8510 N.W. 56TH STREET MIAMI, FL 33166-3329
 Mailing Address: 8510 N.W. 56TH STREET MIAMI, FL 33166-3329



01052007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|--------------------------------|
| 4. FEI Number 59-1450697 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent
 LAMONT & NEIMAN, P.A.
 ONE BISCAYNE TOWER, 3550
 TWO SOUTH BISCAYNE BLVD.
 MIAMI, FL 33131

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2007**

DATE
 01/11/07-80015-010 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM STEWART, JOHN H 5244 N.W. 94 DORAL PLACE MIAMI, FL 331782017 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *[Signature]* x 1/8/07 x 305-592-7990
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #