2007 LIMITEĎ LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

ANNUAL REPORT DOCUMENT # L01000022318 FILED 1. Entity Name SILVERADO PARTNERS, LLC 2001 FEB 15 A II: 33 Principal Place of Business Mailing Address 150 2ND AVENUE NORTH 150 2ND AVENUE NORTH **SUITE 1100 SUITE 1100** SECRETARY OF STATE ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701 01102007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRONSTEIN, JOEL D DO NOT WRITE 150 2ND AVENUE NORTH **SUITE 1100** IN THIS SPACE ST. PETERSBURG, FL 33701 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. **MGRM** TITLE BRONSTEIN, JOEL D 150 SECOND AVENUE NORTH #1100 STREET ADDRESS SAINT PETERSBURG, FL 33701 CITY-ST-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY+S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS 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 it 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.