

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022367

FILED
Jun 25, 2007
Secretary of State

Entity Name: WADSWORTH INVESTMENTS, LLC

Current Principal Place of Business:

2600 DOUGLASS ROAD
SUITE 600
MIAMI, FL 33134

New Principal Place of Business:

504 ARAGON AVENUE
CORAL GABLES, FL 33134

Current Mailing Address:

2600 DOUGLASS ROAD
SUITE 600
MIAMI, FL 33134

New Mailing Address:

504 ARAGON AVENUE
CORAL GABLES, FL 33134

FEI Number: 26-0010679 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:

HOULIHAN, GERALD J ESQUIRE
701 BRICKELL AVENUE #1900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HOULIHAN, GERALD J ESQUIRE
TWO DATRAN CENTER, 9130 S. DADELAND BLVD.,
SUITE 1209
MIAMI, FL 33156 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: GERALD J. HOULIHAN

06/25/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOULIHAN, GERALD J
Address: 2600 DOUGLASS ROAD SUITE 600
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOULIHAN, GERALD J
Address: 504 ARAGON AVENUE
City-St-Zip: CORAL GABLES, FL 33134

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: GERALD J. HOULIHAN

MGR

06/25/2007

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