

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2007 08:00 A.
Secretary of State

DOCUMENT # L02000004592 1. Entity Name YOUNGER-BAKER INVESTMENTS, LLC	
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Principal Place of Business 7301 CAPILLA CT. CORAL GABLES, FL 33143	Mailing Address 7301 CAPILLA CT. CORAL GABLES, FL 33143
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DO NOT WRITE IN THIS SPACE



03072007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 03-0395416	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

MARCUS, SCOTT PA
 3211 PONCE DE LEON BLVD., STE 200
 MIAMI, FL 33134

DO NOT WRITE IN THIS SPACE

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) DATE _____

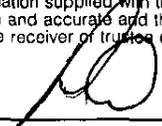
**Filing Fee is \$50.00
 Due by May 1, 2007**

U00000729002
 05/08/07-80021-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAKER, ROBERT 7301 CAPILLA CT. CORAL GABLES, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YOUNGER, MADELEINE 7301 CAPILLA CT. CORAL GABLES, FL 33143
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 of trust, or empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X  **ROBERT BAKER, MGR.** **03/05/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #