2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000009309

1. Entity Name

ARAGON GALIANO HOLDINGS, LLC



FILED Apr 02, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

101 ARAGON AVENUE CORAL GABLES, FL 33134 101 ARAGON AVENUE CORAL GABLES, FL 33134



03222007 No Chg-LLC

CR2E083 (11/05)

305-374-3600

Daytime Phone #

| 4. FEI Number | \vdash | Applied For |
|----------------------------------|----------|----------------|
| 30-0070885 | | Not Applicable |
| 5. Certificate of Status Desired | \$5.00 | Additional |

6. Name and Address of Current Registered Agent

GUZMAN, LEOPOLDO E 101 ARAGON AVENUE CORAL GABLES, FL 33134

SIGNATURE:

DO NOT WRITE IN THIS SPACE

| SIGNATURE | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent algnature required when reinstating) | DATE | |
|---|---|--|--|--|
| | lling Fee is \$50.00 ue by May 1, 2007 | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GUZMAN, LEOPOLDO E 101 ARAGON AVENUE CORAL GABLES, FL 33134 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | U00000683958 04/06/07-80013-017 50.00 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| 11. I hereby certify that the information supplied with this filling 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 posterior to execute this report as required by Chapter 608, Florida Statutes. | | | | |

LEOPOLDO E.

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE