

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009520

Entity Name: SOUTH POINTE, LLC

FILED  
Apr 19, 2007  
Secretary of State

**Current Principal Place of Business:**

3380 MCDONALD STREET  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

3380 MCDONALD STREET  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

FEI Number: 01-0693542

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHERMAN, TOM  
218 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

SHERMAN, TOM  
90 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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:

04/19/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CARNESELLA, BRUNO G  
Address: 3380 MCDONALD STREET  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: MGRM ( ) Delete  
Name: SCATTARREGGIA, PAOLO  
Address: 542 WASHINGTON AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUNO CARNESELLA

MGMR

04/19/2007

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