2007 LIMITED LIABILITY COMPANY :---

STREET ADDRESS CITY-ST-7IP me NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED ANNUAL REPORT Mar 01, 2007 08:00 A **DOCUMENT # L02000014184 Secretary of State** 1. Entity Name 5202 LLC Principal Place of Business Malling Address 14500 SW 77TH STREET 14500 SW 77TH STREET MIAMI, FL 33183-2967 MIAMI, FL 33183-2967 CR2E083 (11/05) 01162007 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent THOMPSON, MARGARET C DO NOT WRITE 14500 SW 77TH STREET MIAMI, FL 33183-2967 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 Signature, typed or printed name of registered agent and tale if applicable. (NOTE: Regulared Agent signature required when reinstating) DATE Filing Fee Is \$50.00 Due by May 1, 2007 00000065274803/12/07-80030-022 50.00 ₽. MANAGING MEMBERS/MANAGERS MGR TITLE THOMPSON, MARGARET C NAME STREET ADDRESS 14500 SW 77TH ST CITY-ST-ZIP MIAMI, FL 331832967 TITLE NAME THOMPSON, BRYSON H STREET ADDRESS 14500 SW 77TH ST CTTY-ST-ZIP MIAMI, FL 331832967 TITLE NAME STREET ADDRESS DO NOT WRITE COTY-ST-ZIP TITLE NAME

IN THIS SPACE

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

MARGARET