2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000018004

1. Entity Name 7370 N.W. 12 STREET, LLC



Principal Place of Business

SIGNATURE:

SIGNATURE AND TYP

- Mailing Address

2121 PONCE DE LEON BLVD., STE. 1035 CORAL GABLES, FL 33134 2121 PONCE DE LEON BLVD., STE. 1035 CORAL GABLES, FL 33134 FILED Apr 17, 2006 08:00 AM Secretary of State



03072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 36-4504518

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, ROBERT W ESQ 2121 PONCE DE LEON BLVD., STE. 1035 CORAL GABLES, FL 33134

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3. 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 title if epipticable	(MOTE: Registered Agent signature (equi	red when renstating)		DATE
Filing Fee is \$50.00 Due by May 1, 2006					
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM RODRIGUEZ, ROBERT W 2121 PONCE DE LEON #1035 MIAMI, FL 33134			02\01\08 00000	10517373 3-80042-012 5 5.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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THEE NAME STREET ADDRESS CITY-ST-ZIP			IN T	THIS SI	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE WAME STREET ADDRESS CITY-SI-ZIP					
11. I hereby of indicated	pertify that the information supplied with this filing does not con this report is true and accurate and that my signature st	qualify for the exemptions contain all have the same legal effect as	ned in Chapter 119 s if made under oa	, Florida Statutes th, that I am a m	. I further certify that the information anaging member or manager of the

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE