

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018044

FILED
Apr 24, 2007
Secretary of State

Entity Name: MACLEE QUARTERS USA, LLC

Current Principal Place of Business:

201 ALHAMBRA CIRCLE, SUITE 601
CORAL GABLES, FL 33134

New Principal Place of Business:

429 LENOX AVE
MIAMI BEACH, FL 33139

Current Mailing Address:

429 LENOX AVENUE
MIAMI BEACH, FL 331396532

New Mailing Address:

429 LENOX AVENUE
MIAMI BEACH, FL 33139

FEI Number: 52-2285888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE, SUITE 601
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COHEN, LEON
Address: 429 LENOX AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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: LEON COHEN

MGR

04/24/2007

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