## 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000025004

Entity Name: HOTELS ZONE, LLC

Name:

FILED Aug 01, 2007 Secretary of State

**New Principal Place of Business:** 

**Current Principal Place of Business:** 

19101 MYSTIC POINT DRIVE 420 SOUTH DIXIE HIGHWAY

SUITE # 1801 3RD FLOOR AVENTURA, FL 33180 CORAL GABLES, FL 33146

**Current Mailing Address: New Mailing Address:** 

19101 MYSTIC POINT DRIVE 420 SOUTH DIXIE HIGHWAY SUITE #1801 3RD FLOOR

AVENTURA, FL 33180 CORAL GABLES, FL 33146

FEI Number: 04-3714469 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

**BUSINESS FILINGS INCORPORATED** ANTONELLI, MARK R ESQ 420 SOUTH DIXIE HIGHWAY 1203 GOVERNORS SQUARE BLVD 3RD FLOOR SUITE 101 TALLAHASSEE, FL 323012960 US CORAL GABLES, FL 33146 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.

Name:

SIGNATURE: MARK R. ANTONELLI 08/01/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: (X) Change ( ) Addition () Delete

DAGAN, LIOR ANTONELLI, MARK R Address: 19101 MYSTIC POINT DR., 1801 Address: 420 SOUTH DIXIE HIGHWAY, 3RD FLOOR

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify 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: MARK R. ANTONELLI **MGRM** 08/01/2007