


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000030517 1. Entity Name BIMINI 4 L.L.C.	
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Principal Place of Business 5100 GRANADA BLVD. CORAL GABLES, FL 33146-2029	Mailing Address 5100 GRANADA BLVD. CORAL GABLES, FL 33146-2029
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DO NOT WRITE IN THIS SPACE



01042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 30-0141443	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**COLL, CRISTINA
5100 GRANADA BLVD.
CORAL GABLES, FL 33146-2029**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COLL, CRISTINA 5100 GRANADA BLVD CORAL GABLES, FL 331462029
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COLL, LAUREN C 5100 GRANADA BLVD CORAL GABLES, FL 331462029
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01/09/08-80055-018 138.75

**DO NOT WRITE
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.

SIGNATURE: Lauren C. Coll, MGRM 01/04/08 305.6633235

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #