2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000032519 1. Entity Name



FILED
Mar 28, 2008 08:00 A
Secretary of State

Principal Place of Business

1428 BRICKELL AVENUE

SUITE 400 MIAMI, FL 33131

ERT, L.C.

Mailing Address

1428 BRICKELL AVENUE SUITE 400

MIAMI, FL 33131



03192008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-1179394 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

Name and Address of Current Registered Agent

CUMMINGS, PAUL 1428 BRICKELL AVENUE, SUITE 400 MIAMI, FL 33131

SIGNATURE:

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e 3)	0:1	28.		4.1	100	416	10.00	"T'	: 60	200	.114	2. 11	.4.

SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE				
FiLE After May	NOWIII FEE IS \$138.75 1, 2008 Fee will be \$538.75		U00000873836 04/10/08-80093-006 416.25				
9.	MANAGING MEMBERS/MANAGERS	記載をおりません。					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CUMMINGS, PAUL M 1428 BRICKELL AVENUE, SUITE 400 MIAMI, FL 33131						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		HIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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.							

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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