2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000009358

Entity Name
 CYPRESS RUN, LLC



FILED Jan 24, 2007 08:00 AN Secretary of State

Principal Place of Business

470 BILTMORE WAY, SUITE 100 CORAL GABLES, FL 33134

Mailing Address

470 BILTMORE WAY, SUITE 100 CORAL GABLES, FL 33134



01192007 No Chg-LLC

CR2E083 (11/05)

 4. FE! Number
 Applied For

 90-0062030
 Not Applicable

 5. Certiflicate of Status Desired
 \$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GARCIA, FIRPO 470 BILTMORE WAY, SUITE 100 CORAL GABLES, FL 33134

STREET ADDRESS

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char tions of registered agent,	nging its registere	d office or registered agent, or b	ooth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or prested name of registered agent and title if applicable. (NOTE Registered A			kgent signature required when reinstaking) DATE	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GARCIA, FIRPO 470 BILTMORE WAY, #100 CORAL GABLES, FL 33134			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				000000600633 01/26/07-80017-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY -ST-ZIP				•
TITLE		-		

11. I hereby certify that the information supplied with this filling 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: SIGNATURE SIGNATURE AND PRESENTATIVE

1/19/04

305-448-2000

Daytime Phone #