2008 LIMITED LIABILITY COMPANY

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ANNUAL REPORT				Feb 11, 2008 08:00	
1. Entity Nam	MENT # L030000 S RUN, LLC	09358		Sec	cretary of Sta
	e of Business RE WAY, SUITE 100 ES, FL 33134	Mailing Address 470 BILTMORE WAY, SU CORAL GABLES, FL 331			ABILO 10180 11101 SIADO 481001 IVI 1094
		-			
DO NOT WRITE IN THIS SPACE			PACE	01142008 No Chg-LLC CR2E083 (12/07)	
			TAUL.	4. FEI Number 90-0062030	Applied For Not Applicable
			•	5. Certificate of Status Desired	\$5.00 Additional Fee Required
	6. Name and Address of Cur	ent Registered Agent			
GARCIA, FIRPO 470 BILTMORE WAY, SUITE 100 CORAL GABLES, FL 33134				DO NOT WRI	
the obligati	named entity submits this statement ions of registered egent. Signature, typed or printed name of registered. NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538	agent and title if applicable (NO1):	registered office or regis		oate 4475 080-013 138,75
9.		MBERS/MANAGERS			
THE NAME. STREET ADDRESS COLY ST ZIP THEE NAME STREET ADDRESS CHY ST ZIP THEE NAME STREET ADDRESS CHY ST ZIP THE NAME STREET ADDRESS CHY ST ZIP	MGR GARCIA, FIRPO 470 BILTMORE WAY, #100 CORAL GABLES, FL 33134			DO NOT WR IN THIS SPA	
NAME. STREET ADDRESS					

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 eath; 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: FIX DO GOYCICA SIGNATURE AND ATTHED OF PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY ST-ZIP