

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013763

FILED
Jan 29, 2008
Secretary of State

Entity Name: CELESTIAL INVESTMENTS, LLC

Current Principal Place of Business:

19667 NE 36TH CT
24K
MIAMI, FL 33180

New Principal Place of Business:

16300 NE 19TH AVE
STE 213
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

19667 NE 36TH CT
24K
MIAMI, FL 33180

New Mailing Address:

16300 NE 19TH AVE
STE 213
NORTH MIAMI BEACH, FL 33162

FEI Number: 11-3686744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, MARCOS
19667 NE 36TH CT
24K
MIAMI, FL 33180 US

Name and Address of New Registered Agent:

COHEN, RAFAEL
16300 NE 19TH AVE
STE 213
NORTH MIAMI BEACH, FL 33162 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.

SIGNATURE: RAFAEL COHEN

01/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOFFMAN, MARCOS
Address: 19471 AMBASSADOR COURT
City-St-Zip: MIAMI, FL 33179

Title: MGR () Delete
Name: WALMAN, TERRY
Address: 16300 NORTHEAST 19TH AVENUE STE 213
City-St-Zip: MIAMI, FL 33162

Title: MGR () Delete
Name: COHEN, MICHAEL
Address: 16300 NORTHEAST 19TH AVENUE STE 213
City-St-Zip: MIAMI, FL 33162

Title: MGR () Delete
Name: COHEN, RAFAEL
Address: 16300 NORTHEAST 19TH AVENUE STE 213
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HOFFMAN, MARCOS
Address: 19667 NE 36TH CT APT 24K
City-St-Zip: AVENTURA, FL 33180

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: COHEN, MICHEL
Address: 16300 NORTHEAST 19TH AVENUE STE 213
City-St-Zip: MIAMI, FL 33162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAFAEL COHEN

MGR

01/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date