2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 03, 2008 8:00 am Secretary of State

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Daytime Phone #

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DOCUMENT # L03000014910 1. Entity Name PENINSULAR INTERNATIONAL REALTY, L.L.C.						04-03-2008 9	90072 03	6 ***138	3.75
Principal Place	e of Business	Mailing Address							
240 ROYAL F	PALM WAY	PO BOX 3228			1 600	19365			
2ND FLR STE B4		PALM BEACH, FL 33480 US		1 000	10000				
PALM BEACH				_					
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2. Principal P	lace of Business - No P.Q. Box #	3. Mailing Address							
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Suite, Apt.	#.etc. ()	Suite, Apt. #, etc.			┥				
Suite	1331				01082008	Chg-LLC	CR2E0	33 (12/06)	
City & State		City & State			4. FEI Number			T Am	affect Co.
 	J				56-2352			_ 	plied For
	alm beach, the	Zip	Coun	t	30-2332	.200			t Applicable
Zip	Country	² \$P	Coun	uy	5. Certificate of	f Status Desired		5.00 Add	
<u>33401</u>	105.4		<u> </u>	T				ee Require	đ
	6. Name and Address of Current F	cegistered Agent			7. Name and	Address of New R	egistered A	gent	
E. 1511750	141 TOM			Name					
FUENTES				Stroot Address	/B O. Boy Number	is Not Acceptable			
	KELL AVENUE			Subtr Address	(F.O. BOX Number	is not acceptable)		
SUITE 702									_
MIAMI, FL	33131								
				City			FL	Zip Code	9
								<u> </u>	
8. The above	named entity submits this statement for lons of registered agent.	the purpose of changing its	s registere	ed office or regist	ered agent, or both	i, in the State of Flo	rida. I am f	amiliar with,	and accept
n ie opiiger	ions of registered agent.								
SIGNATURE:	<u> </u>								
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	TE: Registere	d Agent signature requi	red when reinstating)		DATE		
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9.	MANAGING MEMBER	RS/MANAGERS	TITLE			Florida	Departme	int of State	
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JRE: SIGNATURE AND TYPED ON PROVIDED HAIRE OF SIGNONG MANAGENG MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: