

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017119

Entity Name: PROXIMUS REALTY, L.C.

FILED  
Apr 13, 2007  
Secretary of State

## Current Principal Place of Business:

8900 SW 107TH AVENUE  
SUITE 317  
MIAMI, FL 33176

## New Principal Place of Business:

13002 SW 133RD COURT  
MIAMI, FL 33186

## Current Mailing Address:

8900 SW 107TH AVENUE  
SUITE 317  
MIAMI, FL 33176

## New Mailing Address:

13002 SW 133RD COURT  
MIAMI, FL 33186

FEI Number: 56-2357183

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GABLES REGISTERED AGENTS CORPORATION  
131 MADEIRA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: DEGOMME, YVAN  
Address: 8900 SW 107TH AVE SUITE 317  
City-St-Zip: MIAMI, FL 33176

Title: MGR ( ) Delete  
Name: LIMA, CORI  
Address: 8900 SW 107TH AVE SUITE 317  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DEGOMME, YVAN  
Address: 13002 SW 133RD COURT  
City-St-Zip: MIAMI, FL 33186

Title: MGR (X) Change ( ) Addition  
Name: LIMA, CORI  
Address: 13002 SW 133RD COURT  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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: YVAN DEGOMME

MGR

04/13/2007

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