2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000022157

1. Entity Name
POWER ONE REAL ESTATE INVESTMENTS, LLC

Principal Place of Business	Mailing Address
7900 NW 155TH STREET #201 MIAMI LAKES, FL 33016	7900 NW 155TH STREET #201 MIAMI LAKES, FL 33016

04082005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
47-0921270
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ESPINOSA, LUIS
7900 NW 155TH STREET
MIAMI LAKES, FL 33016

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BEANE, REGINALD E
STREET ADDRESS	7900 NW 155TH ST #201
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	MGRM
NAME	CAMBERT, RENE M
STREET ADDRESS	7900 NW 155TH ST #201
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	MGR
NAME	ESPINOSA, LUIS M
STREET ADDRESS	7900 NW 155TH ST #201
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	MGR
NAME	CAMILLERI, MICHAEL
STREET ADDRESS	7900 NW 155TH ST #201
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	MGR
NAME	RSF CONSULTING
STREET ADDRESS	7900 NW 155TH ST #201
CITY-ST-ZIP	MIAMI LAKES, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000305555
04/14/05-80089-010 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 4/11/05 786-631-3130
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #