


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 11, 2007 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000027247 1. Entity Name 261 NE 1ST STREET, L.L.C. |  |
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| Principal Place of Business 261 NE 1 STREET SUITE 600 MIAMI, FL 33132 | Mailing Address 261 NE 1 STREET. SUITE 600. MIAMI, FL 33132 |
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02262007No Chg-LLC CR2E083 (11/05)

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|---|-----------------------------------|
| 4. FEI Number 11-3699698 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent CHIROUSSOT-CHAMBEAUX, PHILIPPE 261 NE 1 STREET SUITE 600 MIAMI, FL 33132 | DO NOT WRITE IN THIS SPACE |
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

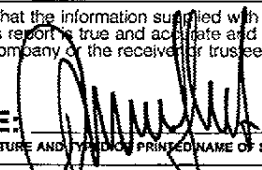
**Filing Fee is \$50.00
Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM CHIROUSSOT-CHAMBEAUX, PHILIPPE 261 NE 1 STREET SUITE 600 MIAMI, FL 33132 |
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07/11/07-80007-020 50.00

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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 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:  **PHILIPPE CHIROUSSOT-CHAMBEAUX** 02/18/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone # 786.303.2191