
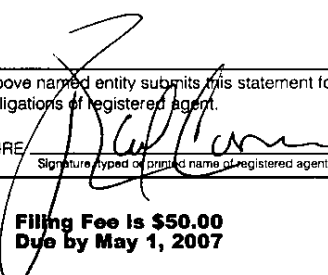
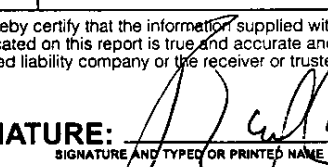


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90027 032 ****50.00

DOCUMENT # L03000027351					
1. Entity Name LEXINGTON MKT LLC					
Principal Place of Business 11050 KENDALL DRIVE SUITE 106 Y, FL 33176 US			Mailing Address 11050 KENDALL DRIVE SUITE 106 MIAMI, FL 33176 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 11050 N. KENDALL DR #106			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MIAMI, FLORIDA		City & State MIAMI, FL		4. FEI Number 57-1181314	
Zip 33176		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CORREA, RAUL L 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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:  <u>Raul Correa</u> 4/19/07 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAUL L 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, GLADYS A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, CAROLINA 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAOUL A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAOUL A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAOUL A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAOUL A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CORREA, RAOUL A 11050 KENDALL DRIVE, SUITE 106 MIAMI, FL 33176	<input type="checkbox"/> Delete			
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:  <u>Raul Correa</u> 4/27/07 3055458436 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					