## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000027630

Entity Name: DORAL EXECUTIVE MANAGEMENT, LLC

FILED Jan 17, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4601 PONCE DE LEON BLVD., SUITE 300 4601 PONCE DE LEON BLVD., SUITE 300 CORAL GABLES, FL 33134

CORAL GABLES, FL 33146

**Current Mailing Address: New Mailing Address:** 

4601 PONCE DE LEON BLVD., SUITE 300 4601 PONCE DE LEON BLVD., SUITE 300

CORAL GABLES, FL 33134 CORAL GABLES, FL 33146

FEI Number: 27-0064762 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOENIGSBERG, JAY 1101 BRICKELL AVENUE, SUITE 800-SOUTH MIAMI, FL 33131

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:

Name:

Electronic Signature of Registered Agent Date

Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Change () Addition () Delete BERRIN, ROBERT G

Address: 4601 PONCE DE LEON BLVD. #300 Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip:

Title: () Delete Title: () Change () Addition

FISHER, ISAAC K Name: Name: Address: 4601 PONCE DE LEON BLVD #300 Address: City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: ROBERT G. BERRIN