2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 15, 2008 08:00 AM Secretary of State

1. Entity Name BLUE RIVIERA, LLC



Principal Place of Business

3711 S.W. 27TH ST. MIAMI, FL 33134 Mailing Address

3711 S.W. 27TH ST. MIAMI, FL 33134



DO NOT WRITE IN THIS SPACE

4.	FEI Number		Applied For
	59-2844469		Not Applicable
5.	Certificate of Status Desired	\$5.00 Additional	

6. Name and Address of Current Registered Agent

WEISSLER, ROBERT I 2200 MUSEUM TOWER 150 WEST FLAGLER ST. MIAMI, FL 33130

THE NAME STREET ADDRESS CITY-ST-ZIP
THE NAME STREET ADDRESS CITY-ST-ZIP
THE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

agido on	nona orregiatored agent.		
SIGNATURE.	Signalure, typod or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$138,75 y 1, 2008 Fee will be \$538.75		000000829702 02/26/08-80052-002 138.75
9.	MANAGING MEMBERS/MANAGERS		
THLE NAME STREET ADDRESS CITY-ST-ZIP	P MILTON, LAZARO 3711 SW 27TH STREET MIAMI, FL 33134	•	
TITLE NAME \ STREET ADDRESS CITY-ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS		IN .	THIS SPACE

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

11. I hereby certify that the information supplied with this filling 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 eath; 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: _	 m co
	OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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3/13/08

Daylime Phone #