

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000032512



1. Entity Name
WPD PROPERTIES, LLC

Principal Place of Business
1613 ALTON ROAD
MIAMI BEACH, FL 33139

Mailing Address
9200 SOUTH DADELAND BLVD., SUITE 400
MIAMI, FL 33156



04272007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0587541

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KADE, PAUL M
DADELAND TOWERS NORTH
9200 SOUTH DADELAND BLVD., SUITE 400
MIAMI, FL 33156

**DO NOT WRITE
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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGR
DELGADO, IRENE
1613 ALTON ROAD
MIAMI BEACH, FL 33139

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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IN THIS SPACE**

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05/15/07-80106-002 50.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Joseph Lipendo 4/23/07 305-558-1400