

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043810

FILED
May 12, 2005
Secretary of State

Entity Name: GURU PROPERTIES, LLC

Current Principal Place of Business:

7306 GARY AVENUE
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

7306 GARY AVENUE
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 56-2414985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BEDNAR, ROBERT C CPA
12700 BISCAYNE BLVD.
SUITE 101
NORTH MIAMI, FL 331812024 US

Name and Address of New Registered Agent:

BEDNAR, ROBERT C CPA
2100 SALZEDO STREET
SUITE 201
CORAL GABLES, FL 331344319 US

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: ROBERT C BEDNAR

05/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MACNIVEN, RUTH
Address: 7306 GARY AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

Title: MGRM (X) Delete
Name: RODRIGUEZ, GUIDO
Address: 7306 GARY AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 C BEDNAR

CPA

05/12/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date