## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 12, 2007 08:00 A

ANNUAL REPURI			Secretary of State		
DOCUMENT # L04000016 1. Enuty Name URBAN INVESTMENTS 1 LLC	901			Secre	tary of State
Principal Place of Business 4800 N. FEDERAL HIGHWAY SUITE 209A BOCA RATON, FL 33431	Mailing Address 4800 N. FEDERAL HIGHWAY SUITE 209A BOCA RATON, FL 33431				
				.J. 88196 (1819 BIRTH	
DO NOT WOITE	IN THIS SDA	Ĉ.	03202007 No Chg-LLC	CR2E083	(11/05)
DO NOT WRITE	IN INIS SPA	CE	4. FEI Number NOT APPLICABLE		Applied For Not Applicable
			5. Certificate of Status Desired		.00 Additional
6. Name and Address of Current F	Registered Agent			· · · · · · · · · · · · · · · · · · ·	
URBANEK, AUGUST 4800 N. FEDERAL HIGHWAY SUITE 209A BOCA RATON, FL 33431  8. The above named entity submits this statement for	the purpose of changing its register	ed office or register	DO NOT W IN THIS SE	PACE	illar with, and accept
the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent a	nd late if applicable. (NOTE: Registere	d Agent signature required	when ranstaing)	· DATE	
Filing Fee Is \$50.00 Due by May 1, 2007					
9. MANAGING MEMBE TITLE MGRM URBANEK, AUGUST STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33431  TITLE NAME			Unono 04/20/07	)702645 -80108-0	01 SD.00
STREET ADDRESS CITY-ST-ZIP TITLE				· · · · · · · · · · · · · · · · · · ·	
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT W	· · · · · · · · · · · · · · · · · · ·	
TITLE NAME			IN THIS SI	PACE	

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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Laget Tubonal

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

4-1-07 561362-8800

Daytime Phone #