


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90101 043 ****50.00

DOCUMENT # L04000017101	
1. Entity Name TRIESTE INTERNATIONAL INVESTMENT LLC	

Principal Place of Business 666 71ST STREET MIAMI BEACH, FL 33141 US	Mailing Address 666 71ST STREET MIAMI BEACH, FL 33141 US
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0807380	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Alan A. Lips
aka GPR
666 71ST STREET
MIAMI BEACH, FL 33141

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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 ☒ _____ (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	<i>VTD</i> SARLENGA, DANIEL 2307 DOUGLAS RD STE 400 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PD</i> <i>Sarlanga, Fernando M</i> 666 71st street Miami, Beach, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>SD</i> <i>Da Sarlanga, Delia</i> 666 71st street Miami, Beach, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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]* _____ 1/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #