

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023675

FILED
Mar 12, 2009
Secretary of State

Entity Name: TRES RIOS REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:

5825 COLLINS AVE, UNIT 15F
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

5825 COLLINS AVE, UNIT 15F
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PORTUONDO, FERNANDO J ESQ
FERNANDO J. PORTUONDO, P.A.
2121 PONCE DE LEON BLVD, STE 600
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RIOS, MARTA
Address: 5825 COLLINS AVE, UNIT 15F
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: RIOS, ANDRES SR.
Address: 5825 COLLINS AVE, UNIT 15F
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM () Delete
Name: RIOS, ANDRES JR.
Address: 5825 COLLINS AVE, UNIT 15F
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES:

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

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 exemption stated in Chapter 119, 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: MARTA RIOS

MGRM

03/12/2009

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