

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026116

FILED
Feb 09, 2007
Secretary of State

Entity Name: STRATEGIC INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

7735 NW 146TH STREET
SUITE 303
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

7735 NW 146TH STREET
SUITE 303
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 20-0974641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, SERGIO
7735 NW 146TH STREET
SUITE 303
MIAMI LAKES, FL 33016 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: ZAMORA, PEDRO L
Address: 7735 NW 146TH STREET, SUITE 303
City-St-Zip: BOCA RATON, FL 33016

Title: MGRM () Delete
Name: RESCIGNO, GEORGE F TRUSTEE
Address: 6267 SOUTHWEST 14TH STREET
City-St-Zip: WEST MIAMI, FL 33144

Title: MGRM () Delete
Name: FERNANDEZ, SERGIO TRUSTEE
Address: 6525 SOUTHWEST 134TH DRIVE
City-St-Zip: PINECREST, FL 33156

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 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: SERGIO FERNANDEZ

MGRM

02/09/2007

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