


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90038 041 ****50.00

DOCUMENT # L04000030478	
1. Entity Name 4 ALHAMBRA, LLC	

Principal Place of Business 1728 CORAL WAY MIAMI FL 33145	Mailing Address 1728 CORAL WAY MIAMI FL 33145
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2. Principal Place of Business - No P.O. Box # 2630 SW 28th Street	3. Mailing Address 2630 SW 28th Street
Suite, Apt. #, etc. #62	Suite, Apt. #, etc. #62
City & State Coconut Grove, FL	City & State Coconut Grove, FL
Zip 33133	Zip 33133
Country USA	Country USA



1st MOORE CR2E083 (10/06)

6. Name and Address of Current Registered Agent DALEY, JILL 1728 CORAL WAY MIAMI FL 33145	7. Name and Address of New Registered Agent Name: Daley, Jill Street Address (P.O. Box Number is Not Acceptable): 2630 SW 28th Street Suite # 62 City: Coconut Grove FL Zip Code: 33133
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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: *Jill Daley* DATE: 3/26/07

Signature, typed or printed name of registered agent and title is applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DALEY, JILL M. 1728 CORAL WAY MIAMI FL 33156 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2630 SW 28th Street #62 Coconut Grove FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ULLOA, TONY 1728 CORAL WAY MIAMI FL 33145 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Coconut Grove FL 33133 (Use this address for all)
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABERNETHAY, JOHN 1728 CORAL WAY MIAMI FL 33145 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DOUBLIER, RENE 1728 CORAL WAY MIAMI FL 33145 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Jill Daley* DATE: 3/26/07 DAYTIME PHONE: 305-856-9200

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