## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # L04000033540

VILLÁGE SQUARE SOUTH, L.L.C.



Principal Place of Business

CITY-ST-ZIP

SIGNATURE:

timited liability company or the receiver of

10720 CARIBBEAN BOULEVARD STE. 101 MIAMI, FL 33189

10720 CARIBBEAN BOULEVARD STE. 101 MIAMI, FL 33189

## **FILED** Apr 30, 2007 8:00 am Secretary of State

04-30-2007 90069 040 \*\*\*\*50.00



03292007 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number 20-1084960

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

SPORT, WILLIAM A 10720 CARIBBEAN BOULEVARD STE. 101 10720 CARIBUL MIAMI, FL 33189

## DO NOT WRITE IN THIS SPACE

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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_	Signature, typed or printed name of registered agent and title if applicable. (NOT	E: Registered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM 🐴	
NAME	SPORT, WILLIAM A	
STREET ADDRESS	10720 CARIBBEAN BOULEVARD STE. 101	
CITY-ST-ZIP	MIAMI, FL 33189	
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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 timited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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