2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Mar 01, 2007 8:00 am Secretary of State

DOCUMENT # L04000046575 1. Entity Name BELVEDERE INVESTORS LLC							03-01-200	7 90189 ()33 ****5	0.00	
	e of Business ER DR SUITE 1325 BEACH, FL 33409	Mailing Address 505 S FLAGLER DR SUITE 1325 WEST PALM BEACH, FL 33409				EDOAGOOD					
<u>50650v</u>	lace of Business - No P.O. Box #	3. Mailing Address 905 South Flag 181 Drive									
Suite, Apt.	1325	Suite. Apt. #, etc. Suite 1325				02202007	Chg-LLC	CR2E0	83 (12/06)		
WILST P	im Beach, FL	West Palm Beach FL			1_	4. FEI Numb 20-132) 	Applicable	
33401	Country W S A	3340 \	Count	4 2°			of Status Desired	ابا	\$5.00 Addi Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.				Street Address (P.O. Box Number is Not Acceptable)							
4TH FLOOR MIAMI, FL 33145											
				City				FL	Zip Code		
	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent ar					ed agent, or bo	oth, in the State of F	lorida. I am f	amiliar with, a	and accept	
	ling Fee is \$50.00 ue by May 1, 2007							ke check partm	ayable to ent of State		
9.	MANAGING MEMBER		10.		11 (0		ADDITIONS	/CHANGES	FT. 4.		
NAME STREET ADDRESS CITY-ST-ZIP	MGR HANNA, PAUL B 505 S FLAGLER DR SUITE 1325 WEST PALM BEACH, FL 33409	☐ Delete		ET ADDRESS ST-ZIP	MGB Han 505 Wes	na, Pau South	al B Flagler I n Blach	170 3 170 3	Mi Change Sui + C 340 l	□ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HANNA, PAUL B 505 S FLAGLER DR SUITE 1325 WEST PALM BEACH, FL 33409	□ Delete	- 4	T ADDRESS	Mes Han Sos	na Pai Southi TPalm	ul B Flagler Beach	orive,	Surte 3340	□ Addition 1325 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete							Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete			710				☐ Change	Addition	
11. I hereby of indicated limited lia	certify that the information supplied with on this report is true and accurate and ability company or the receiver or trustee	this filing does not qualify for hat my signature shall have ampowered to execute this	r the exer the same report as	mptions c e legal effe required	ontained ect as if m by Chap	in Chapter 119 nade under oat ter 608, Florida	l, Florida Statutes. I h; that I am a mana Statutes.	further certify aging member	that the info	rmation r of the	