

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063987

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: BRIGADIERE INVESTMENTS, LLC

## Current Principal Place of Business:

550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134

## New Principal Place of Business:

2655 S. LE JEUNE ROAD  
4TH FLOOR  
CORAL GABLES, FL 33134

## Current Mailing Address:

550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134

## New Mailing Address:

2655 S. LE JEUNE ROAD  
4TH FLOOR  
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEISENFELD, JOSEPH J  
550 BILTMORE WAY  
SUITE 1120  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

WEISENFELD, JOSEPH J  
2655 S. LE JEUNE ROAD  
4TH FLOOR  
CORAL GABLES, FL 33134 US

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:

04/13/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: BECKER, MARIO  
Address: 550 BILTMORE WAY, SUITE 1120  
City-St-Zip: CORAL GABLES, FL 33134 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BECKER, MARIO  
Address: 2655 S. LE JEUNE ROAD, 4TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIO BECKER

MGR

04/13/2005

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