

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069624

FILED  
Jan 06, 2007  
Secretary of State

**Entity Name:** CAPE TRUST PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

7178 A SW 47 STREET  
MIAMI, FL 33155

**New Principal Place of Business:**

7231 SW 63 AVENUE  
SUITE 200  
MIAMI, FL 33143

**Current Mailing Address:**

7178 A SW 47 STREET  
MIAMI, FL 33155

**New Mailing Address:**

7231 SW 63 AVENUE  
SUITE 200  
MIAMI, FL 33143

**FEI Number:** 20-1660267

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FERRER, DAISY  
12440 SW 32 TERRACE  
MIAMI, FL 33175 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: BRU, RAFAEL I  
Address: 12440 SW 32 TERRACE  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BRU, RAFAEL I  
Address: 4680 SW 74 STREET  
City-St-Zip: MIAMI, FL 33143

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: RAFAEL I BRU

MGRM

01/06/2007

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