


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000072038 1. Entity Name 1000 MERIDIAN CONDOMINIUMS, LLC	
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Principal Place of Business 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131	Mailing Address 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131
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**DO NOT WRITE IN THIS SPACE**



04102006No Chg-LLC      CR2E083 (11/05)

4. FEI Number 34-2018767	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired     \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145

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IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when remaining)      DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

1100001515243  
04/26/06-80101-025 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DE CASTRO, ALVARO 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEREZ, NICOLAS 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MAURY, ANDREINA 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GUEDEZ, RAFAEL M 1001 BRICKELL BAY DRIVE, SUITE 3102 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:       04/10/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #