2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 01, 2005
Secretary of State

DOCUMENT# L04000074421

Entity Name: T.GREEN INVESTMENTS, LLC

Current Principal Place of Business:

2999 N.E. 191ST STREET
SUITE 803
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

2999 N.E. 191ST STREET
SUITE 803
AVENTURA, FL 33180

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC.
18901 NE 29TH AVENUE
SUITE 100
AVENTURA, FL 33180 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/MEMBERS:

Title:	MGR	( ) Delete
Name:	STIBON, ARNAUD	
Address:	520 BRICKELL KEY DRIVE, SUITE 0-305	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGR	( ) Delete
Name:	STIVELMAN, JACQUES C	
Address:	2999 N.E. 191ST STREET, SUITE 803	
City-St-Zip:	AVENTURA, FL 33180	
Title:	MGR	( ) Delete
Name:	BENHAMOU, GILBERT	
Address:	2999 N.E. 191ST STREET, SUITE 803	
City-St-Zip:	AVENTURA, FL 33180	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: GILBERT BENHAMOU MGR 03/01/2005

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