2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Apr 21, 2005 8:00 am Secretary of State **DOCUMENT # L04000076719** 04-21-2005 90029 044 ***150.00 859 WINTERGREEN, L.L.C. Principal Place of Business Mailing Address 14215 SW 85TH STREET 14215 SW 85TH STREET MIAMI, FL 33183 MIAMI, FL 33183 2. Principal Place of Business 7720 SW 787H S 3. Mailing Address Suite, Apt. #, etc. 02092005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARBEITO, MARIA E **14215 SW 85TH STREET** MIAMI, FL 33183 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES TITLE MGRM ☐ Delete TITLE Change ■ Addition BARBEITO, MARIA E NAME NAME 7720 SW 78TH STREET STREET ADDRESS 14215 SW 85TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33183 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete -TITLE -- Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZiP 11. I hereby certify that the information supplied with this filing does not qualify 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 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.

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