2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 17, 2007
Secretary of State

DOCUMENT# L04000080835

Entity Name: REED SAVAGE ASSOCIATES OF FLORIDA, L.L.C.

Current Principal Place of Business:

4217 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4217 PONCE DE LEON BLVD.
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-1857000 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REED, CYNTHIA
2627 SOUTH BAYSHORE DRIVE
.1902
MIAMI, FL 33133 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: SAVAGE, LAWRENCE
Address: 2627 SOUTH BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: MGRM ( ) Delete
Name: REED, CYNTHIA P
Address: 2627 SOUTH BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

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 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: CYNTHIA REED MGRM 02/17/2007

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