


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000083174		
1. Entity Name BURTON LASALLE BIOFUND I, LLC		
Principal Place of Business 20454 WEST DIXIE HIGHWAY MIAMI, FL 33180 US	Mailing Address 20454 WEST DIXIE HIGHWAY MIAMI, FL 33180 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SKLAR, RUBEN 20600 NE 20TH PLACE MIAMI, FL 33179		DO NOT WRITE IN THIS SPACE
5. 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by September 14, 2007		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SKLAR, RUBEN 20600 NE 20TH PLACE MIAMI, FL 33180	
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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: <u><i>Ruben Sklar</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<u>7/06/07</u> <u>305 931-2004</u> <small>Date Daytime Phone #</small>



07062007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 37-1499988	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

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07/10/07-80023-014 55.00