2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# L04000085283

Entity Name: 3384 DAY AVENUE, LLC

Current Principal Place of Business:

2601 S. BAYSHORE DRIVE, SUITE 235
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2601 S. BAYSHORE DRIVE, SUITE 235
MIAMI, FL 33133

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:

ALVARO CASTILLO B., P.A.
1390 BRICKELL AVENUE, SUITE 200
MIAMI, FL 33131 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:	ALENDA CONSULTANTS,, LLC	
Address:	2601 S. BAYSHORE DRIVE, SUITE 235	
City-St-Zip:	MIAMI, FL 33133	
Title:	MGR	( ) Delete
Name:	OAKS MANAGING CORPOR, ATION	
Address:	2601 S. BAYSHORE DRIVE, SUITE 235	
City-St-Zip:	MIAMI, FL 33133	
Title:	MGR	( ) Delete
Name:	PEREZ-SORDO, MAGGIE D	
Address:	2601 S. BAYSHORE DRIVE, SUITE 235	
City-St-Zip:	MIAMI, FL 33133	

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: PEREZ-SORDO MAGGIE MGR 04/27/2005

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