2008 LIMITED LIABILITY COMPANY

FILED Mar 10, 2008 08:00 AM Secretary of State

ANNUA	L REPORT	
DOCUMENT # L0400008 1. Entity Name TALL PINES INDUSTRIAL PARK,		
Principal Place of Business	Mailing Address	
5915 PONCE DE LEON BLVD., SUITE 60 CORAL GABLES, FL 33146	5915 PONCE DE LEON BL Coral Gables, Fl 33140	

Principal Place of Business 5915 PONCE DE LEON BLVD., SUITE 60 CORAL GABLES, FL 33146 DO NOT WRITE IN THIS SPAC		UITE 60			
		SE .	03052008 No Chg-LLC	8	
6. Name and Address of Current Registered Agent BENDER, HARRY K BENDER, BENDER & CHANDLER, P.A. 5915 PONCE DE LEON BLVD., SUITE 60 CORAL GABLES, FL 33146				DO NOT WRITE IN THIS SPACE	
	named entity submits this statement ions of registered agent. Sgnature typed or printed name of registered age.		d office or register	red agent, or both, in the State of Florida. I am familiar with, and accept a when reinstating) DATE	ı
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.	75		U00000853593 03/26/08-80072-019 <u>138.7</u> 5	
9. TITLE NAME SIREET ADDRESS CITY-SI-ZIP TITLE NAME	MANAGING MEM MGR MARZANO, PATRECK 5915 PONCE DE LEON BLVD CORAL GABLES, FL 33146	BERS/MANAGERS			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
IITLE NAME STREET ADDRESS CITY-ST-ZIP				*.	
TITLE NAME STREET ADDRESS CITY - ST-ZIP	·				
11. I hereby indicated	certify that the information supplied on this report is true and accurate a	with this filing does not qualify for the exe and that my signature shall have the sam	emptions containe e legal effect as	ed in Chapter 119, Florida Statules. I further certify that the information if made under oath; that I am a managing member or manager of the	

SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE