

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086158

Entity Name: GOLDEN REALTY, LLC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

1301 NW 89TH COURT, SUITE 219
MIAMI, FL 33172

New Principal Place of Business:

9786 NW 29TH TERRACE
MIAMI, FL 33172

Current Mailing Address:

1301 NW 89TH COURT, SUITE 219
MIAMI, FL 33172

New Mailing Address:

9786 NW 29TH TERRACE
MIAMI, FL 33172

FEI Number: 20-1939317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOJNOVER, DIEGO
1301 NW 89TH COURT, SUITE 219
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

GABRIEL, TORRES
9786 NW 29TH TERRACE
MIAMI, FL 33172 US

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: GABRIEL TORRES

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TORRES, GABRIEL
Address: 1301 NW 89TH COURT, SUITE 219
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: KOJNOVER, DIEGO
Address: 1301 NW 89TH COURT, SUITE 219
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TORRES, GABRIEL
Address: 9786 NW 29TH TERRACE
City-St-Zip: MIAMI, FL 33172

Title: MGR (X) Change () Addition
Name: KOJNOVER, DIEGO
Address: 900 BAY DR. APT 412
City-St-Zip: MIAMI BEACH, FL 33141

I hereby certify that the information supplied with this filing does not qualify 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: GABRIEL TORRES

MM

04/27/2007

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