2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000087443

1. Entity Name

ELITÉ HOLDINGS GROUP IX, LLC



FILED Mar 05, 2007 08:00 AN Secretary of State

Principal Place of Business

152 NE 167TH STREET SUITE #300

MIAMI, FL 33162

Mailing Address

152 NE 167TH STREET SUITE #300 MIAMI, FL 33162



02162007 No Chg-LLC

CR2E083 (11/05)

Fee Required

Caviline Phone #

4. FEI Number Applied For 20-1900824 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CIVIL TRIAL PRACTICE, P.A. 152 NE 167TH STREET SUITE 300 MIAMI, FL 33162

SIGNATURE:

DO NOT WRITE
IN THIS SPACE

 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.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007			U00000654712 03/13/07-80073-007 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AELION, DAVID 152 NE 167TH STREET - SUITE #300 MIAMI, FL 33162		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRIME HOLDINGS, LLC 1877 S. FEDERAL HIGHWAY - SUITE 110 BOCA RATON, FL 33432		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOTO, ANGEL 4224 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33021	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEINBERG, MARC 1352 NE 163RD STREET NORTH MIAMI BEACH, FL 33162	IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE