

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089962

FILED
Apr 30, 2008
Secretary of State

Entity Name: THE INVESTMENT & MANAGEMENT GROUP, DIVISION OF REAL ESTATE, LLC

Current Principal Place of Business:

12550 BISCAYNE BLVD
321
MIAMI, FL 33181

New Principal Place of Business:

12550 BISCAYNE BLVD
500
MIAMI, FL 33181

Current Mailing Address:

P.O. BOX 310282
MIAMI, FL 33231-282

New Mailing Address:

P.O. BOX 172753
MIAMI, FL 33017

FEI Number: 05-0612875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEROZO, CIRO R
12550 BISCAYNE BLVD
321
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

PEROZO, CIRO R
12550 BISCAYNE BLVD
500
MIAMI, FL 33181 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: CIRO R. PEROZO

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PEROZO, CIRO R
Address: PO BOX 310282
City-St-Zip: MIAMI, FL 33231-282 US

Title: MGRM () Delete
Name: PEROZO, MARCIA E
Address: PO BOX 310282
City-St-Zip: MIAMI, FL 33231 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PEROZO, CIRO R
Address: PO BOX 172753
City-St-Zip: MIAMI, FL 33017 US

Title: MGRM (X) Change () Addition
Name: PEROZO, MARCIA E
Address: PO BOX 172753
City-St-Zip: MIAMI, FL 33017 US

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: CIRO R. PEROZO

MGR

04/30/2008

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