2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2007 08:00 AM
Secretary of State

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1. Entity Name
OCEAN KEY INVESTMENTS, LLC



Principal Place of Business

2600 S. DOUGLAS ROAD, PH-6 CORAL GABLES, FL 33134 Mailing Address

2600 S. DOUGLAS ROAD, PH-6 CORAL GABLES, FL 33134



01102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For	
20-2005924		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PADIAL, JOSE 2600 S. DOUGLAS ROAD, PH-6 CORAL GABLES, FL 33134

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan- ions of registered agent.	ging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
FI	lling Fee is \$50.00 \\ ue by May 1, 2007 \\ \frac{1}{2007}		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERCENARI, FERNANDO 2600 S. DOUGLAS ROAD, PH-6 CORAL GABLES, FL 33134		11000000000440
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000599412 01/25/07-80027-007 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature stability company or the receiver or truetee empowered to execute	qualify for the exemptions contained in Chapter 11 all have the same legal effect as if made under or out this report as required by Chapter 608, Florid	 Florida Statutes. I further certify that the information ath; that I am a managing member or manager of the a Statutes.