2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2007 08:00 AM Secretary of State

| ANNUAL REPURI | | | | | | Secretary of State | | | | |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------|----------------------------------|------------------------|-------------------|-----------------------------|-----------------------|--|
| Entity Name | ENT # L04000900 ERTY XVI, LLC | 659 | | | | | | · | | |
| Principal Place of B | Business | Mailing Address | | | | | | | | |
| 3750 WEST FLAGLER STREET MIAMI, FL 33134 | | 3750 WEST FLAGLER STREET MIAMI, FL 33134 | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | of Business - No P.O. Box# | 3. Mailing Address | | | 1 | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 01112007 Chg-LLC CR2E083 (12/06) | | | | | |
| City & State | | City & State | | 4. FEI Numb 20-199 | | | | plied For Applicable | | |
| Zip | Country | Zip Coun | | try | 5. Certificate of Status Di | | | 5.00 Add | itional | |
| 6 | 3. Name and Address of Current | Registered Agent | · | | 7. Name and | Address of New | Registered A | ent | | |
| ESTRELLA N | IICOLAS ID DA | | | Name | | | | | | |
| ESTRELLA, NICOLAS JR, PA 3750 WEST FLAGLER STREET MIAMI, FL 33134 | | | | Street Address | (P.O. Box Numb | er is Not Acceptab | le) | | | |
| | | | | City | | | FL | Zip Code | | |
| 8 The above par | ned entity submits this statement fo | ir the numose of changing it | e ragietar | , | arent or he | oth in the State of F | | miliar with | and accept | |
| the obligations | of registered agent. | in the pulpose of changing its | a register | ed Office of Tegiste | agent, of be | on, in the state of | onda. Tarrio | grima veitri, | und dooopt | |
| SIGNATURESigna | ature, typed or printed name of registered agent | and title if applicable (NO | TE, Registere | ad Agent signature require | ed whon reinstating) | | DATÉ | | | |
| Due l | g Fee is \$50.00 by May 1, 2007 | TOO WANTED OF THE STATE OF THE | 140 | | | Floric | la Departme | nt of State | • | |
| 9. | MANAGING MEMBE | Delete | 10. | | | ADDITION | S/CHANGES | Change | Addition | |
| NAME ES | STRELLA, NICOLAS 750 WEST FLAGLER STREET IAMI, FL 33134 | | NAM STR | | | | | C. G. G. G. | | |
| TITLE | | ☐ Delete | וזוד | E | | | | ☐ Change | ☐ Addition | |
| NAME STREET ADDRESS CITY-SI-ZP | | | | AE EET ADDRESS Y-ST-71P | | U000000 | 743411 80107-0 | 25 SA | nn | |
| TITLE | ···· | ☐ Delete | TIT | E . | | <u>. 1134-134 111.</u> | <u> </u> | ☐ Change | Addition | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | 1 | AE EET ADDRESS Y-ST-ZIP | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | | | | | Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS | | ☐ Delete | TIT NA STE | LE L | | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TIT NA STI | | , | | | ☐ Change | Addition | |
| 11. I hereby certi | ify that the information supplied withis report is true and accurate and y company or the receiver trusted. | | for the ex | emptions containe | | | aging membe | that the inf er or manag | ormation er of the | |