

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093891

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: ISLAND PLACE INTERNATIONAL, LLC

**Current Principal Place of Business:**

227 NE 2ND STREET  
B  
MIAMI, FL 33132

**New Principal Place of Business:**

115 N.E. 3RD AVENUE  
MIAMI, FL 33132

**Current Mailing Address:**

227 NE 2ND STREET  
B  
MIAMI, FL 33132

**New Mailing Address:**

115 N.E. 3RD AVENUE  
MIAMI, FL 33132

FEI Number: 20-2090987

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIR TAX  
801 SOUTH FEDERAL HIGHWAY  
HOLLYWOOD, FL 33020 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PRYCE, DAVID  
Address: 227 NE 2ND STREET SUITE B  
City-St-Zip: MIAMI, FL 33132

Title: MGR ( ) Delete  
Name: PRYCE, LAUREL  
Address: 227 NE 2ND STREET SUITE B  
City-St-Zip: MIAMI, FL 33132

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PRYCE, DAVID  
Address: 115 N.E. 3RD AVENUE  
City-St-Zip: MIAMI, FL 33132

Title: MGR (X) Change ( ) Addition  
Name: PRYCE, LAUREL  
Address: 115 N.E. 3RD AVENUE  
City-St-Zip: MIAMI, FL 33132

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: DAVID PRYCE

MGR

04/28/2007

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