

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L05000001912

1. Entity Name
GBS REAL ESTATE GROUP, LLC



Principal Place of Business
16217 KENDALL DRIVE
MIAMI, FL 33196

Mailing Address
16217 KENDALL DRIVE
MIAMI, FL 33196



04272007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2130594	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ESTEVEZ, ESTEBAN
5420 SW 155 CT
MIAMI, FL 33185

**DO NOT WRITE
IN THIS SPACE**

8. 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 relinquishing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ESTEVEZ, ESTEBAN D
STREET ADDRESS	5420 SW 155 CT
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	MGRM
NAME	ESTEVEZ, ONEIDA
STREET ADDRESS	185 HUMPHREY AVE
CITY-ST-ZIP	BAYONNE, NJ 07002
TITLE	MGRM
NAME	VIGNIERO, LEDA
STREET ADDRESS	19964 SW 129 CT
CITY-ST-ZIP	MIAMI, FL 33185
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000747722
05/17/07-80039-001 \$5.00

**DO NOT WRITE
IN THIS SPACE**

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 605, Florida Statutes.

SIGNATURE: _____

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

04/25/07 305-387-3400
Date Daytime Phone #

Received Time Apr. 27. 12:53AM