

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003938

FILED
Apr 12, 2007
Secretary of State

Entity Name: AMERICAN PERSONAL TRUST, LLC

Current Principal Place of Business:

999 PONCE DE LEON BLVD.
SUITE 1040
CORAL GABLES, FL 33134

New Principal Place of Business:

701 WATERFORD WAY
SUITE 300
MIAMI, FL 33126

Current Mailing Address:

999 PONCE DE LEON BLVD.
SUITE 1040
CORAL GABLES, FL 33134

New Mailing Address:

701 WATERFORD WAY
SUITE 300
MIAMI, FL 33126

FEI Number: 20-2176701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUERNICA, EDUARDO A CPA
7300 N.W. 19TH STREET
SUITE 102
MIAMI, FL 33126 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: MGRM () Delete
Name: MACEIRAS, ILIANA
Address: 999 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete
Name: VERDEJA, NEIL
Address: 999 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MACEIRAS, ILIANA
Address: 701 WATERFORD WAY
City-St-Zip: MIAMI, FL 33126

Title: MGRM (X) Change () Addition
Name: VERDEJA, NEIL
Address: 701 WATERFORD WAY
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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: ILIANA MACEIRAS

MGRM

04/12/2007

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