

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000006591

FILED  
Jun 30, 2009  
Secretary of State

Entity Name: FLORIDA REALTY INTERNATIONAL INVESTORS, LLC

**Current Principal Place of Business:**

365 ARVIDA PARKWAY  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

365 ARVIDA PARKWAY  
CORAL GABLES, FL 33156

**New Mailing Address:**

FEI Number: 65-1247312      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MARTINI, GREGORY T  
2655 LEJEUNE ROAD, SUITE 1101  
CORAL GABLES, FL 33134      US

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: MARCO ANTONIO DESOUZA  
Address: 365 ARVIDA PARKWAY  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGR      ( ) Delete  
Name: FLAVIO HADDAD BUAZAR  
Address: 365 ARVIDA PARKWAY  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGR      ( ) Delete  
Name: ADOLFO LINDENBERG FILHO  
Address: RUA JOAQUIA FLORIANO 466  
City-St-Zip: SAO PALLO SP 04534-002,

Title: MGR      ( ) Delete  
Name: LODOVICI, PEDRO  
Address: RUA JOAQUIA FLORIANO 466  
City-St-Zip: SAO PALLO SP 04534-002,

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARCO ANTONIO DESOUZA

MANA

06/30/2009

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