

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010248

**FILED**  
**Mar 05, 2008**  
**Secretary of State**

**Entity Name:** ROCA REAL ESTATE ADVISORS, LLC

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE, #700  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

2100 PONCE DE LEON BLVD  
SUITE 1100  
CORAL GABLES, FL 33134

**Current Mailing Address:**

201 ALHAMBRA CIRCLE, #700  
CORAL GABLES, FL 33134

**New Mailing Address:**

2100 PONCE DE LEON BLVD  
SUITE 1100  
CORAL GABLES, FL 33134

FEI Number: 65-0778425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROCA, RUBEN A  
201 ALHAMBRA CIRCLE, #700  
CORAL GABLES, FL 33134 US

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

ROCA, RUBEN A  
2100 PONCE DE LEON BLVD  
SUITE 1100  
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: RUBEN A. ROCA

03/05/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROCA, RUBEN A  
Address: 201 ALHAMBRA CIRCLE, #700  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ROCA, RUBEN A  
Address: 2100 PONCE DE LEON BLVD., SUITE 1100  
City-St-Zip: CORAL GABLES, FL 33134

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: RUBEN A. ROCA

MR.

03/05/2008

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