

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012020

FILED
Jan 17, 2008
Secretary of State

Entity Name: 1800 CLUB 4206 LIMITED LIABILITY COMPANY

Current Principal Place of Business:

770 CLAUGHTON ISLAND DRIVE
APT # 2005
MIAMI, FL 33131

New Principal Place of Business:

770 CLAUGHTON ISLAND DRIVE
SUITE # 2005
MIAMI, FL 33131

Current Mailing Address:

770 CLAUGHTON ISLAND DRIVE
APT # 2005
MIAMI, FL 33131

New Mailing Address:

770 CLAUGHTON ISLAND DRIVE
SUITE # 2005
MIAMI, FL 33131

FEI Number: 20-2946827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUIRRE, SHIRLEY
770 CLAUGHTON ISLAND DRIVE
APT # 2005
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

AGUIRRE, SHIRLEY
770 CLAUGHTON ISLAND DRIVE
SUITE # 2005
MIAMI, FL 33131 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:

01/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AGUIRRE, SHIRLEY
Address: 770 CLAUGHTON ISLAND DRIVE APT # 2005
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete
Name: SAVI, ALEJANDRO
Address: 770 CLAUGHTON ISLAND DRIVE APT # 2005
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Delete
Name: ARCE, LIDA
Address: 1451 SOUTH MIAMI AVE APT#3606
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: AGUIRRE, SHIRLEY
Address: 770 CLAUGHTON ISLAND DRIVE SUITE # 2005
City-St-Zip: MIAMI, FL 33131

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: SHIRLEY

P

01/17/2008

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