


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L05000015596 1. Entity Name ESTATE INVESTMENTS, L.L.C.	
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Principal Place of Business % LEHTINEN, VARGAS & RIEDI, P.A. 7700 N. KENDALL DRIVE, SUITE 303 MIAMI, FL 33156	Mailing Address % LEHTINEN, VARGAS & RIEDI, P.A. 7700 N. KENDALL DRIVE, SUITE 303 MIAMI, FL 33156
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**DO NOT WRITE IN THIS SPACE**



04232007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-2766088	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

REIDI, CLAUDIO ESQ.  
7700 N. KENDALL DRIVE, SUITE 303  
MIAMI, FL 33156

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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


**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREY, ROLAND EICHHOERNLIWEG 41/5734 REINACH SWITZERLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREY, PASCAL Y FAU-BLANC 20B/1009 PULLY SWITZERLAND,
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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L000000734230  
05/09/07-80119-006 50.00

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 608, Florida Statutes.

**SIGNATURE:**       **April 24 2007** (305)279-1166  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #

ROLAND FREY