

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032505

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: SILBERWILL, L.L.C.

**Current Principal Place of Business:**

169 E. FLAGLER ST. SUITE 1534  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

169 E. FLAGLER ST. SUITE 1534  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-2624150

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SERBER, DANIEL J ESQ.  
TURNBERRY PLAZA, SUITE 801  
2875 N.E. 191ST STREET  
AVENTURA, FL 33180 US

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

NICENBOIM, JOSE  
169 E. FLAGLER ST.  
SUITE #1534  
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: JOSE NICENBOIM

04/28/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WILENSKY, MIGUEL A  
Address: 21050 POINT PLACE, #2404  
City-St-Zip: AVENTURA, FL 33180

Title: MGR ( ) Delete  
Name: SILBERGLEIT, HUGO T  
Address: 21050 POINT PLACE, #2404  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES:**

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: WILENSKY MIAGUEL A

MGR

04/28/2007

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