

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035408

Entity Name: MERIDIEN 1009, LLC

FILED
Jul 23, 2007
Secretary of State

Current Principal Place of Business:

1717 N BAYSHORE DRIVE
SUITE 215
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

1717 N BAYSHORE DRIVE
SUITE 215
MIAMI, FL 33132 US

New Mailing Address:

12515 N. KENDALL DRIVE
SUITE 300
MIAMI, FL 33186 US

FEI Number: 20-2658910 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:

BEDARD, DENNIS R
1717 N BAYSHORE DRIVE
SUITE 215
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: PEREIRA, TEODORO
Address: 1717 N BAYSHORE DRIVE SUITE 215
City-St-Zip: MIAMI, FL 33132 US

Title: MGRM (X) Delete
Name: NUNEZ, RAFAEL
Address: 1717 N BAYSHORE DRIVE SUITE 215
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RAFAEL, NUNEZ
Address: 1717 N BAYSHORE DRIVE SUITE 215
City-St-Zip: MIAMI, FL 33132 US

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: RAFAEL NUNEZ

MGRM

07/23/2007

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