

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051361

Entity Name: FLORIDAPROP, LLC

FILED
Jul 12, 2007
Secretary of State

Current Principal Place of Business:

8000 NW 31 STREET
SUITE #8
DORAL, FL 33122

New Principal Place of Business:

Current Mailing Address:

4801 NW 99TH COURT
DORAL, FL 33178

New Mailing Address:

FEI Number: 20-2901409 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:

MAURIN, FERNANDO J
4801 NW 99TH COURT
DORAL, FL 33178 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: MAURIN, FERNANDO
Address: 4801 NW 99TH COURT
City-St-Zip: DORAL, FL 33178

Title: MGRM () Delete
Name: KEYMER, GABRIEL
Address: 201 CRANDON BLVD., #502
City-St-Zip: KEY BISCAWAYNE, FL 33149

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: GABRIEL KEYMER

MGRM

07/12/2007

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