


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 01, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L05000055571</b> 1. Entity Name MERCO GROUP AT GB RESIDENCES LC	
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Principal Place of Business 6701 COLLINS AVENUE ST. JULIEN ROOM MIAMI BEACH, FL 33141	Mailing Address 5101 COLLINS AVENUE MANAGEMENT OFFICE MIAMI BEACH, FL 33140
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**DO NOT WRITE IN THIS SPACE**



01262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2971145	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

ZARETSKY, LOUIS D.  
555 N.E. 15TH STREET  
SUITE 100  
MIAMI, FL 33132

**DO NOT WRITE  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

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

000000750824  
05/18/07-80078-006 100.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MERCO GROUP AT 107TH AVENUE, INC. 6701 COLLINS AVENUE, ST. JULIEN ROOM MIAMI BEACH, FL 33141
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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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/29/07 (305) 854-6680  
Date Daytime Phone #