

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058459

Entity Name: SPIAGGIA 204 UNIT, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

247 SW 8TH STREET, #359
MIAMI, FL 33130 US

New Principal Place of Business:

247 SW 8TH STREET
SUITE 359
MIAMI, FL 33130 US

Current Mailing Address:

247 SW 8TH STREET, #359
MIAMI, FL 33130 US

New Mailing Address:

247 SW 8TH STREET
SUITE 359
MIAMI, FL 33130 US

FEI Number: 20-2986269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICARDO L. CARMONA, PA
2800 PONCE DE LEON BLVD.
SUITE 1160
CORAL GABLES, FL 33134 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: CAMPO, JAIME A
Address: 247 SW 8TH STREET, #359
City-St-Zip: MIAMI, FL 33130 US

Title: MGRM () Delete
Name: SHERVO CORP.,
Address: 247 SW 8TH STREET, #359
City-St-Zip: MIAMI, FL 33130 US

Title: MGRM () Delete
Name: RODRIGUEZ, ANA CAROLINA
Address: 247 SW 8TH STREET, #359
City-St-Zip: MIAMI, FL 33130 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAIME CAMPO

MGR

04/30/2007

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