2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000063085

1. Entity Name
GB HOSPITALITY MANAGEMENT LLC



FILED Apr 25, 2008 08:00 AN Secretary of State

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



04212008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number			Applied For
	20-3049047			Not Applicable
_	Cartificate of Status Decised	 \$5.0	0	Additional

5. Certificate of Status Desired

Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

SIGNATURE:

SIGNATURE AND TYPED OR

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	IN		T	H	IS	S	P	Α	C	E

Date

Daytime Phone ≠

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	: NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RIO APARTMENTS, INC. 5101 COLLINS AVENUE MIAMI BEACH, FL 33140		U000G0321523
TITLE NAME STREET ADDRESS CITY-ST-ZIP			05/15/08-80009-023 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NT	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-SI-ZIP			
indicated	certify that the information supplied with this filing does not q on this report is true and accurate and that my signature shi bility company or the receiver of trustee empowered to exec	all have the same legal effect as if made under oath	n; that I am a managing member or manager of the

NTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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