

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067232

Entity Name: 1755 AQUA VISTA LLC

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

2200 SOUTH DIXIE HIGHWAY
705
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2200 SOUTH DIXIE HIGHWAY
705
MIAMI, FL 33133

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

Name and Address of New Registered Agent:

FELDMAN, BENNETT G
2655 LEJEUNE ROAD
508
CORAL GABLES, FL 33134 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: RENZI, RENZO
Address: 2200 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33133

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

Title: MGRM () Delete
Name: RENZI, PASQUALE
Address: 2200 SOUTH DIXIE HIGHWAY
City-St-Zip: MIAMI, FL 33133

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

Title: MGRM (X) Delete
Name: ELI HADAD,
Address: 2020 NE 163RD STREET
City-St-Zip: N. MIAMI BEACH, FL 33162

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: RENZO RENZI

MGRM

05/02/2007

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