2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 02, 2006 8:00 am Secretary of State DOCUMENT #L05000071608 03-02-2006 90135 008 ****50.00 1. Entity Name SAN REMO HOMES HOLDINGS, LLC **CUUTATIT** Principal Place of Business Mailing Address 780 NW LE JEUNE ROAD 780 NW LE JEUNE ROAD **SUITE 324** SUITE 324 MIAMI, FL 33126 MIAMI, FL 33126 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 02092006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number 20-3279789 Applied For Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ESQUIRE CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 780 NW LE JEUNE ROAD **SUITE 324** MIAMI, FL 33126 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES TITLE Delete TITLE Change 🔀 Addition NAME NAME Dinuro Investments, LLC. STREET ADDRESS STREET ADORESS 780 NW LeJuene Road, Ste. 324 Miami, Florida 33126 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MGR NAME NAME Starmac, LLC. STREET ADDRESS STREET ADDRESS 780 NW LeJuene Road Miami, Florida 33 Ste. 324 CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition MGR NAMÉ NAME Merici, LLC. STREET ADDRESS STREET ADDRESS 780 NW LeJuene Road, Ste. 324 CITY-ST-ZIP CITY-ST-ZIP Miami, Florida-TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this ting 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 any 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 true see any powered to execute this report as required by Chapter 608, Florida Statutes.

Marco Romagnoli

SIGNATURE:

FILED

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