

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073812

FILED
Apr 29, 2008
Secretary of State

Entity Name: LUMARE PROPERTIES LLC.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD.
SUITE 240
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD.
SUITE 240
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 47-0958024 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS FERNANDEZ & CO, P.A.
2121 PONCE DE LEON BLVD.
SUITE 240
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: P () Delete
Name: REYES, NELSON
Address: 2121 PONCE DE LEON BLVD. 240
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: REYES, LUIS F
Address: 2121 PONCE DE LEON BLVD. 240
City-St-Zip: CORAL GABLES, FL 33134

Title: S () Delete
Name: REYES, MAURICIO
Address: 2121 PONCE DE LEON BLVD. 240
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: HENAO, OFELIA
Address: 2121 PONCE DE LEON BLVD. 240
City-St-Zip: CORAL GABLES, FL 33134

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:

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: NELSON REYES

P

04/29/2008

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