

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085638

FILED
Apr 19, 2007
Secretary of State

Entity Name: CENTRUST VLP HOLDINGS, LLC

Current Principal Place of Business:

4011 WEST FLAGLER STREET, SUITE 404
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

4011 WEST FLAGLER STREET, SUITE 404
MIAMI, FL 33134

New Mailing Address:

FEI Number: 20-3390735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELASO, ROLANDO
2030 DOULGAS ROAD
MIAMI, 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: MGR () Delete
Name: HERIBERTO & AGUEDA V, ELASCO FAMILY L LLP
Address: 4011 WEST FLAGLER STREET, SUITE 404
City-St-Zip: MIAMI, FL 33134

Title: P () Delete
Name: VELASSO, ROLANDO
Address: 4011 W FLAGLER STREET STE 404
City-St-Zip: MIAMI, FL 33134

Title: VP () Delete
Name: VALASO, MIRIAM E
Address: 4011 W FLAGLER STREET STE 404
City-St-Zip: MIAMI, 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MIRIAM E. VELASCO

VP

04/19/2007

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