

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091589

Entity Name: LATITUDE ONE 1614 LLC

FILED
Feb 25, 2007
Secretary of State

Current Principal Place of Business:

C/O MS. BENAİM, 99 S.E. MIZNER BLVD.
SUITE/APT # 601
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

C/O MS. BENAİM, 99 S.E. MIZNER BLVD.
SUITE/APT # 601
BOCA RATON, FL 33432 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

IVONNE, ATTAS
C/O MS. BENAİM, 99 S.E. MIZNER BLVD
SUITE/APT #601
BOCA RATON, FL 33432 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: MGRM () Delete
Name: ATTAS, IVONE
Address: C/O MS. BENAİM, 99 S.E. MIZNER BLVD, 601
City-St-Zip: BOCA RATON, FL 33432 US

Title: D () Delete
Name: JONATHAN, HUMPIERRES
Address: C/O MS BENAİM 99 S.E MIZNER BLVD 606
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES:

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: ATTAS IVONE

MGMR

02/25/2007

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