2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2009
Secretary of State

DOCUMENT# L05000091589

Entity Name: LATITUDE ONE 1614 LLC

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

C/O MS. BENAIM, 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. BENAIM, 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. BENAIM, 99 S.E. MIZNER BLVD, 601
City-St-Zip: BOCA RATON, FL 33432 US

Title: D ( ) Delete
Name: JONATHAN, HUMPIERRES
Address: C/O MS BENAIM 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 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: IVONNE ATTAS MMM 04/11/2009

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