

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000094446

FILED
Feb 25, 2008
Secretary of State

Entity Name: NORMANDY ISLE INVESTMENT GROUP LLC

Current Principal Place of Business:

6488 CORAL WAY
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

6488 CORAL WAY
MIAMI, FL 33155

New Mailing Address:

FEI Number: 20-0434669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARES, JOSE L
6488 CORAL WAY
MIAMI, FL 33155 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: ARES, JOSE L
Address: 6488 CORAL WAY
City-St-Zip: MIAMI, FL 33155

Title: MGR () Delete
Name: CASCUDO, JORGE
Address: 9320 FONTAINEBLEAU BLVD., #415
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: LEONCIO, AVELINO R
Address: 14511 ROSEWOOD ROAD
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGR () Delete
Name: CRUZ, JORGE
Address: 3212 SW 142 COURT
City-St-Zip: MIAMI, FL 33175

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: JOSE L ARES

MGR

02/25/2008

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