

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098869

FILED  
Aug 03, 2006  
Secretary of State

**Entity Name:** GENI INVESTMENT PROPERTIES, LLC

**Current Principal Place of Business:**

7585 NW 71ST TERRACE  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

7585 NW 71ST TERRACE  
PARKLAND, FL 33067

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

JEAN-PIERRE, NICKETTE  
7585 NW 71ST TERRACE  
PARKLAND, FL 33067 US

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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: JEAN-PIERRE, NICKETTE  
Address: 7585 NW 71ST TERRACE  
City-St-Zip: PARKLAND, FL 33067

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: DUMERVIL, GIELLE  
Address: 488 NW 165TH STREET ROAD SUITE B 214  
City-St-Zip: MIAMI, FL 33169

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: NICKETTE JEAN-PIERRE

MGRM

08/03/2006

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