2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L05000103364

1. Entity Name 8020 RED ROAD, LLC



Apr 23, 2007 08:00 A Secretary of State

FILED

Principal Place of Business

C/O GARY C. MATZNER, ESQ. 201 SOUTH BISCAYNE BOULEVARD, SUITE 2200 MIAMI, FL 33131

Mailing Address

C/O GARY C. MATZNER, ESQ. 201 SOUTH BISCAYNE BOULEVARD, SUITE 2200 MIAMI, FL 33131



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
16-1760979	 	Not Applicabl
5. Certificate of Status Desired		D Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MATZNER, GARY C ESQ 201 SOUTH BISCAYNE BOULEVARD, SUITE 2200 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of char	nging its registered office or registered agent, or both, in the Stat	e of Florida. I am familiar with, and accept
the obligations of registered agent.		•
SIGNATURE		
Signature, typed or printed name of registered agent and title II applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

Filing Fee Is \$50.00 Due by May 1, 2007

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATINER, VERONICA 5660 SW 97TH ST MIAMI, FL 33156
NAME STREET ADDRESS CHY-ST-ZIP	•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-\$1-ZIP	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

MANAGING MEMBERS/MANAGERS

DO NOT WRITE IN THIS SPACE

U000000723327 05/02/07-80068-001 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of true employee approved to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING

EMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #