2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L05000106002

1. Entity Name 7007 PALMETTO INVESTMENTS, LLC

FILED Jan 31, 2007 08:00 AM **Secretary of State**

Principal Place of Business

1500 SAN REMO AVENUE 251

CORAL GABLES, FL 33146

Mailing Address

1500 SAN REMO AVENUE

DO NOT WRITE IN THIS SPACE

CORAL GABLES, FL 33146 US



01292007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3967650

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NICOLAS J. WATKINS, P.A. 501 BRICKELL KEY DRIVE 504

DO NOT WRITE IN THIS SPACE

MIAMI, FL 33131		III TIIIO OI AGE	
8. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
FI D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOSE I. JUNCADELLA, P.A. 1500 SAN REMO AVENUE, SUITE 251 CORAL GABLES, FL 33146		U00000614087 02/06/07-80012-001 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			32, 33, 3, 33312 331 33,33
NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS			

nation supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information and abdurate 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 presented or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the information indicated on this report is true and limited liability company

SIGNATURE

City-ST-ZIP

AME OF SIGMING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-29-07