

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109183

Entity Name: MIRAFLORES, LLC

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

169 EAST FLAGLER STREET, SUITE 1123  
MIAMI, FL 33131

## New Principal Place of Business:

9100 SOUTH DADELAND BLVD  
SUITE 1500  
MIAMI, FL 33156

## Current Mailing Address:

169 EAST FLAGLER STREET, SUITE 1123  
MIAMI, FL 33131

## New Mailing Address:

9100 SOUTH DADELAND BLVD  
SUITE 1500  
MIAMI, FL 33131

FEI Number: 20-3772919

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA, LLC  
100 S.E. SECOND STREET, SUITE 2900  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

OSMAN, SCOTT A AGENT  
9100 SOUTH DADELAND BLVD  
SUITE 1500  
MIAMI, FL 33156 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: SCOTT OSMAN

01/15/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LG MIRAFLORES EQUITY, , LLC  
Address: 1691 MICHIGAN AVENUE, SUITE 300  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WEINGARTEN, ALLEN  
Address: PO BOX 9296  
City-St-Zip: RANCHO SANTA FE, CA 92067

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: SCOTT OSMAN

AGEN

01/15/2009

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