

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000111774

FILED
Jan 18, 2007
Secretary of State

Entity Name: THE CONDO COMPANY OF LAS VEGAS LLC

Current Principal Place of Business:

2600 WEST SAHARA AVE #104
LAS VEGAS, NV 89102

New Principal Place of Business:

Current Mailing Address:

9476 HARDING AVE
SURFSIDE, FL 33154

New Mailing Address:

401 EAST LAS OLAS BLVD
SUITE 1400
FORT LAUDERDALE, FL 33301

FEI Number: 56-2546072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEDWITZ, MICHAEL A
9476 HARDING AVE
SURFSIDE, FL 33154 US

Name and Address of New Registered Agent:

LEDWITZ, MICHAEL A
401 EAST LAS OLAS BLVD
SUITE 1400
FORT LAUDERDALE, FL 33301 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:

01/18/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEDWITZ, MICHAEL A
Address: 9476 HARDING AVE
City-St-Zip: SURFSIDE, FL 33154 US

Title: MBRM () Delete
Name: ROBLED, RICHARD
Address: 1812 SPRING SUMMIT LANE
City-St-Zip: LAS VEGAS, NV 89102

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEDWITZ, MICHAEL A
Address: 401 EAST LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301 US

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: MICHAEL LEDWITZ

MGRM

01/18/2007

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