

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112344

FILED
May 01, 2009
Secretary of State

Entity Name: KAPAX REGPI, LLC

Current Principal Place of Business:

500 S. DIXIE HIGHWAY
SUITE 304
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

500 S. DIXIE HIGHWAY
SUITE 304
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-4882661 FEI Number Applied For () 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:

INFANTE, ZUMPANO, HUDSON, & MILOCH, LLC
500 S. DIXIE HIGHWAY
SUITE 302
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: VILA, FERNANDO R
Address: 1331 BRICKELL BAY DRIVE UNIT 1408
City-St-Zip: MIAMI, FL 33133

Title: MGRM () Delete
Name: ALINA SARDINAS,
Address: 9800 SW 69TH COURT
City-St-Zip: PINECREST, FL 33156

Title: MGR () Delete
Name: ZUMPANO, CARLOS A
Address: 1015 PLACETAS AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: INFANTE, EMIL R
Address: 1121 HARDEE ROAD
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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

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

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

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: EMIL R. INFANTE

MGR

05/01/2009

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