2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112611

Entity Name: 1107 INVESTMENTS, LLC

FORT LAUDERDALE, FL 33327

City-St-Zip:

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2900 GLADES CIR SUITE 850 WESTON, FL 33327 US **New Mailing Address: Current Mailing Address:** 2900 GLADES CIR SUITE 850 WESTON, FL 33327 US FEI Number: 20-3828797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRICENO, ELIZABETH 2900 GLADES CIRCLE SUITE 850 WESTON, FL 33327 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ALVAREZ, ENRIQUE J Name: Name: Address: 708 WEST PALM AIR DR Address: City-St-Zip: POMPANO BEACH, FL 33069 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: BRICENO, RAUL Name: Address: 8900 GLADES CIR SUITE 850 Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ, LUIS Name: Name: 2900 GLADES CIR SUITE 850 Address: Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: () Delete Title: Title: () Change () Addition GONZALEZ, TOMAS Name: Name: 2900 GLADES CIR SUITE 850 Address: Address: City-St-Zip: WESTON, FL 33327 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CONELA, ADRIANO Name: Name: 2900 GLODES CIRCLE, STE 850 Address: Address:

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.

City-St-Zip:

SIGNATURE: LUIS HERNANDEZ MGR 01/06/2009