## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**FILED** Jan 17, 2007 08:00 AM Secretary of State

DOCL	IMEN	JT#	L05000	117223
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1. Entil Name

PFIRST CUTLER GARDENS, LLC



Principal Place of Business

Mailing Address

8700 W. FLAGLER STREET, STE. 165 MIAMI, FL 33174

8700 W. FLAGLER STREET, STE. 165 MIAMI, FL 33174



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3935574

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, OSVALDO J **7951 SW 40TH STREET** SUITE 206 MIAMI, FL 33155

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	ove named entity submits this statement for the purpose of char gations of registered agent.	nging its registered office or registered agent, or both, in th	e State of Florida. I am familiar with, and accept
SIGNATUR	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		

MANAGING MEMBERS/MANAGERS

MGR NAME LAGO, JULIO STREET ADDRESS 8700 W. FLAGLER STREET, STE. 160 CITY-ST-ZIP MIAMI, FL 33174 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

01/17/07-80080-007 50.00

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #