2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L05000117223

1. Entity Name

FIRST 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

FILED Feb 07, 2008 08:00 AM Secretary of State



01312008No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	20-3935574

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Name and Address of Current Registered Ager

MORIS, ALBERTO N 8700 W. FLAGLER STREET, STE. 165

MIAMI, FL 33174

DO NOT WRITE IN THIS SPACE

	the above named entity submits this statement for the purpose of cha- ne obligations of registered agent.	inging its registered office or registered agent, or both, in the Sta	te of Florida. I am familiar with, and accept
SIG	NATURE	(NOTE Designated Associations have regulated when rejectivities)	DATE

FILE NOWIII FEE (S \$138.75 After May 1, 2008 Fee will be \$538.75

9. '	MANAGING MEMBERS/MANAGERS
TITLE NAME	MGR LAGO, JULIO
STREET ADDRESS CITY-ST-ZIP	8700 W. FLAGLER STREET, STE. 160 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 NAME STREET ADDRESS GITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

DO NOT WRITE

11. I hereby certify that the information supplied with this filing 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:

CITY-ST-ZIP