

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118410

FILED
Apr 24, 2009
Secretary of State

Entity Name: ALI REAL ESTATE INVESTMENTS, L.L.C.

Current Principal Place of Business:

11904 MIRAMAR PKWY
MIRAMAR, FL 33025

New Principal Place of Business:

17913 NW 7TH ST STE 103
PEMBROKE PINES, FL 33029 28

Current Mailing Address:

11904 MIRAMAR PKWY
MIRAMAR, FL 33025

New Mailing Address:

17913 NW 7TH ST STE 103
PEMBROKE PINES, FL 33029 28

FEI Number: 20-5040826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CPC ACCOUNTING SERVICES
11904 MIRAMAR PKWY
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

CPC ACCOUNTING SERVICES
17913 NW 7TH ST STE 103
PEMBROKE PINES, FL 33029 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: LEOPOLDO J RIOS

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALI BAH AL DEEN
Address: CC GINA LOCAL 33 BERMUDEZ
City-St-Zip: CUMAN A EDO SUCRE VZLA,

Title: MGRM () Delete
Name: BORIS D. BAH AL DEEN
Address: CC GINA LOCAL 33 BERMUDEZ
City-St-Zip: CUMAN A EDO SUCRE VZLA,

ADDITIONS/CHANGES:

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: BORIS BAH AL DEEN

MGRM

04/24/2009

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