2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000120431

1. Entity Name SAGE ON 3RD, LLC



FILED Jan 22, 2007 08:00 AM Secretary of State

Principal Place of Business 130 THIRD STREET MIAMI BEACH, FL 33139 Mailing Address

C/O I LEND AMERICA 12000 BISCAYNE BLVD., SUITE 409 NORTH MIAMI, FL 33181



01122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3895428 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

KARL J. SCHUMER, P.A. 18851 N E 29 AVE HARBOUR CENTER, SUITE 700 AVENTURA, FL 33180

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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The above named entity submits this statement for the purpose of cha	inging its registered office or registered agent, or both, in the S	State of Florida I am familiar with, and accept
the obligations of registered agent.		
SIGNATURE		
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

ITILE
NAME
STREET ADDRESS
CITY-ST-ZIP
MIAMI, FL 33180

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

01/23/07-80009-004 50.00

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS

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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: X

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

X 1/15/06

Daytime Phone #