

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000003351

Entity Name: HARBOUR HOUSE 531 LLC

FILED
Nov 14, 2007
Secretary of State

Current Principal Place of Business:

8574 NW 70TH STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8574 NW 70TH STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEODORO, HOFFMANN
8574 NW 70TH STREET
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: HOFFMAN, TEODORO
Address: 8574 NW 70 TH STREET
City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete
Name: VIVAS, ALBERT D
Address: 8574 NW 70TH STREET
City-St-Zip: MIAMI, FL 33172

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: HOFFMAN, ALEEN
Address: 8574 NW 70TH STREET
City-St-Zip: MIAMI, FL 33166

Title: MGR () Change (X) Addition
Name: VIVAS, FLORA
Address: 8574 NW 70TH STREET
City-St-Zip: MIAMI, FL 33166

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: ALBERT VIVAS

MGR

11/14/2007

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