

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004175

FILED
May 01, 2007
Secretary of State

Entity Name: APPALOOSA LAND INVESTMENTS, LLC

Current Principal Place of Business:

3924 N.W. 63 TERRACE
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

3924 N.W. 63 TERRACE
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ENRIQUEZ, STEPHEN C
ONE S.E. 3 AVENUE
SUITE 1440
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

ENRIQUEZ, STEPHEN C
15291 NW 60TH AVENUE
SUITE 100
MIAMI LAKES, FL 33014 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:

05/01/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIAZ, OSCAR ENRIQUE
Address: 3924 N.W. 63 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: MGRM () Delete
Name: CUEVAS, DANIEL FELIX
Address: 3924 N.W. 63 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33067 US

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: STEPHEN ENRIQUEZ

SECT

05/01/2007

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