2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000006169

Entity Name: FS CONDO, LLC

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5730 SW 56 TERRACE 2600 DOUGLAS ROAD

MIAMI, FL 33143 US SUITE 506

MIAMI, FL 33134 US

Current Mailing Address: New Mailing Address:

396 ALHAMBRA CIRCLE 2600 DOUGLAS ROAD

SUITE 210 SUITE 506

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

FEI Number: 20-4134459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RESTREPO, DIEGO L ESQ.

396 ALHAMBRA CIRCLE

2600 DOUGLAS ROAD

SUITE 500

SUITE 210 SUITE 506

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: DIEGO L RESTREPO ESQ 04/24/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 LOSADA, ALBERTO
 Name:

 Address:
 218 SEA VIEW DRIVE
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33149 US
 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 SINISTERRA, JULIAN RODRIGO
 Name:

 Address:
 6910 NW 50 ST., SUITE 10723
 Address:

 City-St-Zip:
 MIAMI, FL 33166 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 SINISTERRA, GUSTAVO
 Name:

 Address:
 6910 NW 50 ST., SUITE 10723
 Address:

 City-St-Zip:
 MIAMI, FL 33166 US
 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: ALBERTO LOSADA MGRM 04/24/2009