

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007175

Entity Name: BISCAYNE PINECREST, LLC

FILED  
Apr 15, 2007  
Secretary of State

**Current Principal Place of Business:**

799 CRANDON BLVD  
306  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

799 CRANDON BLVD  
306  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 20-4157109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOROOKA GARCIA, MAMI  
799 CRANDON BLVD  
306  
KEY BISCAYNE, FL 33149 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: MGRM ( ) Delete  
Name: MOROOKA GARCIA, MAMI  
Address: 799 CRANDON BLVD, APT 306  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM ( ) Delete  
Name: TURBAN DAVILA, MARIA DEL PILA  
Address: 9901 SW 70 AVE  
City-St-Zip: PINECREST, FL 33156

**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 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: MAMI MOROOKA

MGRM

04/15/2007

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