

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000013762 1. Entity Name THIRD STREET, LLC	
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Principal Place of Business 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131	Mailing Address 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131
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01042008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4262788	Applied For Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KAPUSTIN, RAFAEL
25 S.E. 2ND AVENUE, SUITE 750
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-stating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000779235
01/11/08-80029-012 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPUSTIN, RAFAEL 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPUSTIN, SARA 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPUSTIN, ANDREW JAY 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPUSTIN, GINA EVE 25 S.E. 2ND AVENUE, SUITE 750 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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

12/27/07 3053719090
Date Daytime Phone #