

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016566

FILED
Apr 24, 2007
Secretary of State

Entity Name: BLUE RIBBON PARTNERS LLC

Current Principal Place of Business:

530 SANTURCE AVE.
CORAL GABLES, FL 33143

New Principal Place of Business:

Current Mailing Address:

530 SANTURCE AVE.
CORAL GABLES, FL 33143

New Mailing Address:

1172 SOUTH DIXIE HIGHWAY
233
CORAL GABLES, FL 33146

FEI Number: 20-4321013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX MANAGEMENT SERVICES CORP
7955 NW 12TH ST.
SUITE 400
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

HEGEWISCH, VICTORIA M
530 SANTURCE AVENUE
CORAL GABLES, FL 33143 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: VICTORIA HEGEWISCH

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RESTREPO, LINA M
Address: 18151 NE 31 ST.
City-St-Zip: AVENTURA, FL 33160

Title: MGRM () Delete
Name: HEGEWISCH, VICTORIA M
Address: 530 SANTURCE AVE.
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM (X) Delete
Name: TUBILLA, MARIA
Address: 6400 SW 116 ST.
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HEGEWISCH, VICTORIA M
Address: 530 SANTURCE AVE
City-St-Zip: CORAL GABLES, FL 33143

Title: MGRM (X) Change () Addition
Name: TUBILLA, MARIA
Address: 301 ISLAND DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

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: VICTORIA HEGEWISCH

MGRM

04/24/2007

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