

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017847

Entity Name: CARE 2 INVEST, LLC

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

10370 S.W. 220 STREET, #131  
MIAMI, FL 33190

## New Principal Place of Business:

## Current Mailing Address:

10370 S.W. 220 STREET, #131  
MIAMI, FL 33190

## New Mailing Address:

FEI Number: 84-1702940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

MIGNON, CLAIRE M  
10370 S.W. 220 STREET  
#131  
MIAMI, FL 33190 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: CLAIRE-M MIGNON

04/27/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MIGNON, CLAIRE M  
Address: 10370 S.W. 220 STREET, #131  
City-St-Zip: MIAMI, FL 33190

Title: MGR ( ) Delete  
Name: LEGROS, EMMANUEL  
Address: 10370 S.W. 220 STREET, #131  
City-St-Zip: MIAMI, FL 33190

Title: S ( ) Delete  
Name: MIGNONE, CLAIRE M  
Address: 10370 S.W. 220 STREET, #131  
City-St-Zip: MIAMI, FL 33190

Title: T ( ) Delete  
Name: LEGROS, EMMANUEL M  
Address: 10370 S.W. 220 STREET, #131  
City-St-Zip: MIAMI, FL 33190

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: MIGNON, CLAIRE M  
Address: 10370 S.W. 220 STREET, #131  
City-St-Zip: MIAMI, FL 33190

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: CLAIRE M. MIGNON

MGR

04/27/2007

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