


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Aug 23, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000026843							
1. Entity Name CONTRUST COMPANY, LLC							
Principal Place of Business 9360 S.W. 72ND STREET, SUITE 210 MIAMI, FL 33173			Mailing Address 9360 S.W. 72ND STREET, SUITE 210 MIAMI, FL 33173				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	4. FEI Number			
				08162007 Chg-LLC CR2E083 (12/06)			
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
8. The above named entry 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 <i>Mariano J Perez</i>		MARIANO J PEREZ		8-16-07			
<small>Signature, typed or printed name of registered agent and when applicable</small>		<small>(NOTE: Registered Agent Signature required when reinstating)</small>		<small>DATE</small>			
Filing Fee is \$50.00 Due by September 14, 2007			Make check payable to Florida Department of State				
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES				
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PEREZ, MARIANO J		NAME				
STREET ADDRESS	9360 S.W. 72ND STREET, SUITE 210		STREET ADDRESS	000000772704			
CITY-ST-ZIP	MIAMI, FL 33173		CITY-ST-ZIP	08/23/07-90006-001 50.00			
TITLE	ST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PEREZ, MARIANO J		NAME				
STREET ADDRESS	9360 S.W. 72ND STREET, SUITE 210		STREET ADDRESS				
CITY-ST-ZIP	MIAMI, FL 33173		CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
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NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
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NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
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 <i>Mariano J Perez</i>		MARIANO J PEREZ		8-16-07 305 270 0050			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>DATE</small>		<small>DAYTIME PHONE #</small>			