

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

03-19-2007 90466 035 *****50.00

DOCUMENT # L06000032469 1. Entity Name 2212 CORAL WAY LLC					
Principal Place of Business 2000 S DIXIE HWY 100 MIAMI, FL 33133			Mailing Address 2000 S DIXIE HWY 100 MIAMI, FL 33133		
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		
6. Name and Address of Current Registered Agent ABBASSI, RAY 2000 S DIXIE HWY SUITE 100 MIAMI, FL 33133				7. Name and Address of New Registered Agent Name <u>ABBASSI, Michael</u> Street Address (P.O. Box Number is Not Acceptable) <u>2000 S Dixie Hwy suite 100</u> <u>Miami</u> City <u>FL</u> Zip Code <u>33133</u>	
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 <u>[Signature]</u> (NOTE: Registered Agent signature required when transferring) DATE <u>3-12-07</u>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, RAY 2000 S DIXIE HWY SUITE 100 MIAMI, FL 33133	☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, Kathy 2000 S Dixie Hwy suite 100 Miami, FL 33133
☒ Change ☒ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GOLKAR, REZA 1643 BRICKELL AVE #705 MIAMI, FL 33129	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, Kathy 2000 S Dixie Hwy suite 100 Miami, FL 33133
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, ABDI 2000 S DIXIE HWY SUITE 100 MIAMI, FL 33133	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, Kathy 2000 S Dixie Hwy suite 100 Miami, FL 33133
☐ Change ☐ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, ABDI 2000 S DIXIE HWY SUITE 100 MIAMI, FL 33133	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ABBASSI, Kathy 2000 S Dixie Hwy suite 100 Miami, FL 33133
☐ Change ☐ Addition		☐ Change ☐ Addition			
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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date <u>3-17-07</u> Daytime Phone # <u>305-636-5755</u>	