

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037279

FILED
May 15, 2007
Secretary of State

Entity Name: ANTIPODAS PROPERTY BEACH, LLC

Current Principal Place of Business:

18501 PEMBROKE PINES BLV
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

18501 PEMBROKE PINES BLV
SUITE 300
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

18501 PEMBROKE PINES BLV
PEMBROKE PINES, FL 33029 US

New Mailing Address:

18501 PEMBROKE PINES BLV
SUITE 300
PEMBROKE PINES, FL 33029 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

COHEN, DAISY T
18501 PEMBROKE PINES BLV
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

COHEN, DAISY T
18501 PEMBROKE PINES BLV
SUITE 300
PEMBROKE PINES, FL 33029 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: DAISY COHEN

05/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NICOLAIDES, DAISY
Address: 18501 PEMBROKE PINES BLV
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR () Delete
Name: COHEN, DAISY T
Address: 18501 PEMBROKE PINES BLV
City-St-Zip: PEMBROKE PINES, FL 33029 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NICOLAIDES, DAISY
Address: 18501 PEMBROKE PINES BLV SUITE 300
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR (X) Change () Addition
Name: COHEN, DAISY T
Address: 18501 PEMBROKE PINES BLV SUITE 300
City-St-Zip: PEMBROKE PINES, FL 33029 US

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: DAISY COHEN

MGR

05/15/2007

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