2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L06000043637

Entity Name: LIBERE GROUP, LLC

Current Principal Place of Business:

169 E. FLAGLER STREET
1518
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

169 E. FLAGLER STREET
1518
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-1275926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CASTELLANOS, GERARDO A
169 E. FLAGLER STREET
1518
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	ORREGO, DAVID S	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGRM	( ) Delete
Name:	ORREGO, CARLOS E	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGRM	( ) Delete
Name:	ORREGO, JOSE J	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGRM	( ) Delete
Name:	ORREGO, LUIS G	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGRM	( ) Delete
Name:	ORREGO, JUAN E	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	
Title:	MGRM	( ) Delete
Name:	ORREGO, ELIAS	
Address:	169 E. FLAGLER STREET SUITE 1518	
City-St-Zip:	MIAMI, FL 33131	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: DAVID ORREGO MGR 04/24/2007

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