

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047635

FILED
May 01, 2008
Secretary of State

Entity Name: TAMACH-JR-GEB COMMERCIAL CONVERSION GROUP, LLC

Current Principal Place of Business:

2600 DOUGLAS ROAD
PH 8
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 653337
MIAMI, FL 33265

New Mailing Address:

5040 NW 7TH STREET
STE: 632
MIAMI, FL 33126

FEI Number: 20-4844449 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

GONZALEZ, CARLOS
2600 DOUGLAS ROAD
PH 8
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

RUIZ, JOHN
5040 NW 7TH STREET
PH
MIAMI, FL 33126 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: JOHN RUIZ

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, CARLOS
Address: 2600 DOUGLAS ROAD, PH8
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: RUIZ, JOHN H
Address: 5040 NW 7TH STREET PENTHOUSE
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES:

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 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: JOHN RUIZ

MGR

05/01/2008

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