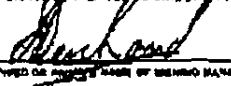


2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L08000052248			
1. Entity Name CHETPRA PROPERTIES #2, LLC			
Principal Place of Business 5101 BISCAYNE BLVD MIAMI, FL 33137		Mailing Address 5831 NE 6TH COURT MIAMI, FL 33137	
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 20-4932258		Applied Fee Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent WILLIAM R. BLACK & ASSOCIATES, P.A. 2691 E. OAKLAND PARK BLVD SUITE 402 FT. LAUDERDALE, FL 33306		7. Name and Address of New Registered Agent	
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		FL	Zip Code
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 lender, guarantor, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and signatory (if any)			
Filing Fee is \$80.00 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	MGRM CHETPRA LIMITED PARTNERSHIP 5831 NE 6TH COURT MIAMI, FL 33137 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ 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 registered or future employee to execute this report as required by Chapter 806, Florida Statutes.			
SIGNATURE: 		7/30/09	
Signature, typed or printed name of managing member, manager, or authorized representative		Date	

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\$138.75