FILED 2008 LIMITED LIABILITY COMPANY Apr 07, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # L06000052850 1. Entity Name **1711 UNIT LLC** Principal Place of Business Mailing Address 1331 BRICKELL BAY DRIVE, UNIT 4707 1331 BRICKELL BAY DRIVE, UNIT 4707 MIAMI. FL .33131_ MIAMI, FL 33131 "不可以是是这样。 02122008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4922539 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent DO NOT WRITE BAEZ, GUSTAVO 1331 BRICKELL BAY DRIVE, UNIT 4707 MIAMI, FL 33131 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable UUUUU08849Mii 04/17/08-80030-011 143.75 FILE NOW!!! FEE IS \$138,75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME BAEZ, GUSTAVO 1331 BRICKELL BAY DRIVE, UNIT 4707 STREET ADDRESS MIAMI, FL 33131 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 accounte 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 receptor or truesde empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

> WHEN OF PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND

Daytime Phone #