2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2007
Secretary of State

DOCUMENT# L06000054486

Entity Name: ALLCON, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
999 BRICKELL AVENUE, STE. 700 MIAMI, FL 33131	999 BRICKELL AVENUE STE. 700 MIAMI, FL 33131

Current Mailing Address:	**New Mailing Address:**
999 BRICKELL AVENUE, STE. 700 MIAMI, FL 33131	999 BRICKELL AVENUE STE. 700 MIAMI, FL 33131

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

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
MERKIN, STEWART A ESQ. 444 BRICKELL AVENUE, STE. 300 MIAMI, FL 33131 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: ____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:		**ADDITIONS/CHANGES:**	
Title:	MGR ( ) Delete	Title:	( ) Change ( ) Addition
Name:	CORPORATE AGENTS (BV, I) LIMITED	Name:	
Address:	PALM GROVE BLDG., ROAD TOWN	Address:	
City-St-Zip:	TORTOLLA, BRITISH VIRGIN IS.,	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 TE BOEKHORST MGR 01/04/2007

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