

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
May 01, 2007
Secretary of State**

DOCUMENT# L06000054984

Entity Name: KOKOPELLI, LLC

Current Principal Place of Business:

2522 FISHER ISLAND DRIVE
MIAMI BEACH, FL 33109

New Principal Place of Business:

Current Mailing Address:

2522 FISHER ISLAND DRIVE
MIAMI BEACH, FL 33109

New Mailing Address:

FEI Number: 20-4971701 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:

Name and Address of New Registered Agent:

CHEEMA, BALWANT
8301 NW 197 STREET
MIAMI, FL 33015 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: MGRM () Delete
Name: SHANE, SUSAN
Address: 2522 FISHER ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: SHANE, RONALD
Address: 2522 FISHER ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: FERNANDEZ, LUIS
Address: 2522 FISHER ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33109

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: FERNANDEZ, LAURA
Address: 2522 FISHER ISLAND DRIVE
City-St-Zip: MIAMI BEACH, FL 33109

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: SUSAN SHANE

MGRM

05/01/2007

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