

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000055953

Entity Name: ARCO PROPERTIES, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

9200 S DADELAND BLVD
STE 320
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

9200 S DADELAND BLVD
STE 320
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 20-4960595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALARCON, ALVARO
9200 S DADELAND BLVD
STE 320
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

ALARCON, ALVARO MGR
9200 S DADELAND BLVD
STE 320
MIAMI, FL 33156 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: ALARCON ALVARO

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ALARCON, ALVARO
Address: 9200 S DADELAND BLVD STE 320
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM () Delete
Name: HERRERA, GUSTAVO A
Address: 9755 NW 52 STEET 514
City-St-Zip: DORAL, FL 33178 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALARCON, ALVARO MGR
Address: 9200 S DADELAND BLVD STE 320
City-St-Zip: MIAMI, FL 33156 US

Title: MGRM (X) Change () Addition
Name: HERRERA, GUSTAVO A MGRM
Address: 9755 NW 52 STEET 514
City-St-Zip: DORAL, FL 33178 US

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: ALARCON ALVARO

MGR

04/26/2007

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