

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000072772

FILED
May 03, 2010
Secretary of State

Entity Name: RIVERSIDE VILLA INVESTMENT, LLC

Current Principal Place of Business:

1089 N.E. 91 TERRACE
MIAMI SHORES, FL 33138

New Principal Place of Business:

12300 N.W. 2 AVENUE
NORTH MIAMI, FL 33168

Current Mailing Address:

1089 N.E. 91 TERRACE
MIAMI SHORES, FL 33138

New Mailing Address:

12300 N.W. 2 AVENUE
NORTH MIAMI, FL 33168

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

MORALES, LILIANA P
1089 N.E. 91 TERRACE
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

RUIZ, DORA E
12300 NW 2 AVENUE
NORTH MIAMI, FL 33168 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: DORA RUIZ

05/03/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RUIZ, DORA E
Address: 12300 NW 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGRM
Name: MORALES, CARLY J
Address: 12300 NW 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGRM
Name: RUIZ, EDGAR A
Address: 12300 NW 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGRM
Name: BONILLA, DORA
Address: 242 NE 127 ST
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGRM
Name: ARRIETA, KEVIN
Address: 12300 NW 2 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

I hereby 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: DORA RUIZ

MGRM

05/03/2010

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