2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074105

VACA DE MONSALVO, MARIA A

LOS NARANJOS DE LAS MERCEDES,

CALL ARTURO MICHELENA, EDIFICO SOHO P.H.A.

Name:

Address:

City-St-Zip:

Entity Name: GREEN 12, LLC

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11246 NW 59 TERRACE DORAL, FL 33178 **Current Mailing Address: New Mailing Address:** P.O.BOX 227596 MIAMI, FL 33122 US FEI Number: 20-5274910 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: QUINTERO, JEANNETTE 11246 NW 59 TERRACE DORAL, FL 33178 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: () Delete Title: () Change () Addition QUINTERO, JEANNETTE Name: Name: Address: P.O.BOX 227596 Address: City-St-Zip: MIAMI, FL 33122 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ROSALES, RICARDO Name: Address: 11246 NW 59 TERRACE Address: City-St-Zip: DORAL, FL 33178 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MONSALVO, FERNANDO H Name: Name: CALL ARTURO MICHELENA, EDIFICO SOHO P.H.A. Address: Address: City-St-Zip: LOS NARANJOS DE LAS MERCEDES, City-St-Zip: Title: MGR () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANNETTE QUINTERO MGR 05/01/2008