

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083279

FILED
Apr 09, 2007
Secretary of State

Entity Name: ROBINSON INVESTMENT GROUP LLC

Current Principal Place of Business:

3560 N.W. 189 STREET
MIAMI, FL 33056

New Principal Place of Business:

3560 N.W. 189 STREET
MIAMI GARDENS, FL 33056

Current Mailing Address:

P.O. BOX 551930
MIAMI, FL 33055

New Mailing Address:

FEI Number: 22-3941844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ROBINSON, PATRICE S MGR
3560 NW 189TH STREET
MIAMI GARDENS, FL 33056 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: PATRICE S ROBINSON

04/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ROBINSON, PATRICE S
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI, FL 33056

Title: MGR () Delete
Name: ROBINSON, MYRIE JR.
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI, FL 33056

Title: S () Delete
Name: ROBINSON, MYRIE JR.
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI, FL 33056

Title: T () Delete
Name: ROBINSON, PATRICE
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROBINSON, PATRICE S
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: MGR (X) Change () Addition
Name: ROBINSON, MYRIE JR.
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: S (X) Change () Addition
Name: ROBINSON, MYRIE JR.
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: T (X) Change () Addition
Name: ROBINSON, PATRICE
Address: 3560 N.W. 189 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

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: PATRICE S ROBINSON

MGR

04/09/2007

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