2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000083397

1. Entity Name
SAN REMO 406 LLC

Principal Place of Business
214 ALMERIA AVENUE
MIAMI, FL 33134 US

Mailing Address
214 ALMERIA AVENUE
MIAMI, FL 33134 US

DO NOT WRITE IN THIS SPACE

01062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
56-2631476

Applied For
Not Applicable

5. Certificate of Status Desired X $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CARRAZANA, ALICIA M D.M.D.
214 ALMERIA AVENUE
CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000789777
01/23/08-80006-024 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CARRAZANA, ALICIA M D.M.D.
STREET ADDRESS	214 ALMERIA AVE
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

SAN REMO 406 LLC

SIGNATURE: _____ JANUARY 07, 2008.- (305) 361-2645
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

ALICIA M. CARRAZANA - MGRM