

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083519

Entity Name: AAAA OCEAN 3008, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

550 BILTMORE WAY
#103
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

550 BILTMORE WAY
#103
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHEBLIKIAN, SHAHEN A
550 BILTMORE WAY
#103
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: GHEBLIKIAN, SHAHEN A
Address: 550 BOLTMORE WAY, SUITE #103
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ZAGA, SHARON
Address: 550 BILTMORE WAY, #103
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GHEBLIKIAN, SHAHEN A
Address: 550 BILTMORE WAY, SUITE #103
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: ZAGA, RAFAEL
Address: 550 BILTMORE WAY, #103
City-St-Zip: CORAL GABLES, FL 33156

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: SHAHEN A. GHEBLIKIAN

MGR

04/30/2008

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