

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

08 APR 21 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01252008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5489115	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TORRE, VENANCIO
4320 SANTA MARIA STREET
CORAL GABLES, FL 33146

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TORRE HOLDINGS, LLC 4320 SANTA MARIA STREET CORAL GABLES, FL 33146
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04/23/08--01016--012 **38.75
02/15/07-90274-049-\$100.00

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DIAGON MNGR

3/31/08 (35) 740-0057
Date Daytime Phone #