

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000096642

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** 500 EAST LAS OLAS DEVELOPMENT LLC

**Current Principal Place of Business:**

THE RELATED GROUP  
315 S. BISCAYNE BLVD, 3RD FLOOR  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

THE RELATED GROUP  
315 S. BISCAYNE BLVD, 3RD FLOOR  
MIAMI, FL 33131

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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: P  
Name: PEREZ, JORGE  
Address: 315 S. BISCAYNE BLVD., 3RD FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: VS  
Name: HOYOS, JEFFERY  
Address: 315 S. BISCAYNE BLVD., 3RD FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: V  
Name: ALLEN, MATTHEW  
Address: 315 S. BISCAYNE BLVD., 3RD FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM  
Name: TRELCOM DEVELOPMENT, LTD.  
Address: 315 S. BISCAYNE BLVD, 3RD FLOOR  
City-St-Zip: MIAMI, FL 33131

I hereby 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: MONICA G ZAMBRANO, ATTY-IN-FACT.                      MGRM                      03/29/2012

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