## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109046

Entity Name: 792 HOMESTEAD BLVD, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 PONCE DE LEON BLVD., SUITE 603 792 HOMESTEAD BLVD. CORAL GABLES, FL 33134 HOMESTEAD, FL 33034

Current Mailing Address: New Mailing Address:

901 PONCE DE LEON BLVD., SUITE 603 9263 SW 136 TER CORAL GABLES, FL 33134 MIAMI, FL 33034

FEI Number: 20-8420713 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALBORNOZ, WILLIAM H
901 PONCE DE LEON BLVD., SUITE 603
CORAL GABLES, FL 33134 US
OSORNO, JUAN M
9263 SW 136 TER
MIAMI, FL 33176 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: JUAN M. OSORNO 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name:ALBORNOZ, WILLIAM HName:OSORNO, JUAN MAddress:901 PONCE DE LEON BLVD., SUITE 603Address:9263 SW 136 TER

Address: 901 PONCE DE LEON BLVD., SUITE 603 Address: 9263 SW 136 TER City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33176

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: JUAN M. OSORNO MGR 04/30/2009