

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118289

Entity Name: FLORIDA WATER, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

825 BRICKELL BAY DRIVE
SUITE 1950
MIAMI, FL 33131

New Principal Place of Business:

999 BRICKELL AVENUE
STE 700
MIAMI, FL 33131

Current Mailing Address:

825 BRICKELL BAY DRIVE
SUITE 1950
MIAMI, FL 33131

New Mailing Address:

999 BRICKELL AVENUE
STE 700
MIAMI, FL 33131

FEI Number: 20-8939556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOSA, JOHN C
825 BRICKELL BAY DRIVE
SUITE 1950
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

SOSA, JOHN C ESQ
999 BRICKELL AVENUE
STE 700
MIAMI, FL 33131 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: JOHN C. SOSA

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SOSA, JOHN C
Address: 825 BRICKELL BAY DRIVE, SUITE 1950
City-St-Zip: MIAMI, FL 33131

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LUKIS, SYLVESTER
Address: 836 MADRID STREET
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Change (X) Addition
Name: ASSENZA, ANTONIO J
Address: 6460 NW 72ND WAY
City-St-Zip: PARKLAND, FL 33067

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: SYLVESTER LUKIS

MGRM

04/30/2007

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