

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119084

FILED
Sep 07, 2007
Secretary of State

Entity Name: VEREDAS AT NORTH SHORE, LLC

Current Principal Place of Business:

120 CARRETERA 693
DORADO, PR 00646

New Principal Place of Business:

11996 SW 81 LANE
MIAMI, FL 33183

Current Mailing Address:

120 CARRETERA 693
DORADO, PR 00646

New Mailing Address:

11996 SW 81 LANE
MIAMI, FL 33183

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHERMAN, THOMAS G ESQ
90 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: PRISA ENTERPRISES, I, NC.
Address: 120 CARRETERA 693
City-St-Zip: DORADO, PR 00646

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

Title: MGR () Delete
Name: HACIENDA LOS ANGELES, CORP
Address: 680 N.E. 108TH LANE
City-St-Zip: ANTHONY, FL 32617

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

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: JORGE REDONDO, HACIENDA LOS ANGELES CORP. P

09/07/2007

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