2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# L06000119299

Entity Name: ELITE PROPERTY INVESTMENT GROUP, LLC

Current Principal Place of Business:

100 AZURE WAY
MIAMI SPRINGS, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

100 AZURE WAY
MIAMI SPRINGS, FL 33166 US

New Mailing Address:

FEI Number: 20-8189345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

AMOR, MONICA ESQ
100 AZURE WAY
MIAMI SPRINGS, FL 33166 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: MGRM ( ) Delete
Name: AMOR, MONICA ESQ
Address: 100 AZURE WAY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: MGRM ( ) Delete
Name: QUESADA, ANGEL A
Address: 100 AZURE WAY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: AMOR, MONICA ESQ
Address: 100 AZURE WAY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

Title: V-P (X) Change ( ) Addition
Name: QUESADA, ANGEL A
Address: 100 AZURE WAY
City-St-Zip: MIAMI SPRINGS, FL 33166 US

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: MONICA AMOR PRES 05/02/2007

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