2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000004150

Entity Name: MIAMI ECONOMIC DEVELOPMENT FUND, LLC

FILED Jul 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 444 S.W. 2ND AVENUE, 5TH FLOOR MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 444 S.W. 2ND AVENUE, 5TH FLOOR MIAMI, FL 33130 FEI Number: 20-8219794 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: CITY OF MIAMI OFFICE OF THE CITY ATTORNEY 444 SW 2ND AVENUE 9TH FLOOR MIAMI,, FL 33130 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: CITY OF MIAMI OFFICE OF THE CITY ATTORNEY 07/14/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: () Change (X) Addition DIAZ. MANNY Name: Name: Address: Address: 3500 PAN AMERICAN DRIVE City-St-Zip: City-St-Zip: MIAMI, FL 33133 Title: Title: MS. () Change (X) Addition () Delete Name: Name: MAZIQUE, LISA Address: Address: 444 SW 2ND AVE. 3RD FLOOR City-St-Zip: City-St-Zip: MIAMI, FL 33130 Title: () Delete Title: () Change (X) Addition ALEXANDER, KOTELES Name: Name: 3500 PAN AMERICAN DRIVE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33133 Title: () Delete Title: MR. () Change (X) Addition Name: Name: MENSAH, GEORGE 444 SW 2ND AVE, 2ND FLOOR Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33130 Title: () Delete Title: () Change (X) Addition WOODS, CLARENCE Name: Name: 49 NW 5 STREET, STE 100 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33128 Title: () Delete Title: () Change (X) Addition SPRING, LARRY Name: Name: Address: Address: 444 SW 2ND AVE, 10TH FLOOR MIAMI, FL 33130 City-St-Zip: 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: MARCUS AURELIUS JAMES MR. 07/14/2008