

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022661

Entity Name: INDIAN LAKE ESTATES, LLC

FILED
May 09, 2008
Secretary of State

Current Principal Place of Business:

6953 HARDING AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

9020 NW 150 TER
MIAMI LAKES, FL 33018

Current Mailing Address:

6953 HARDING AVE
MIAMI BEACH, FL 33139

New Mailing Address:

9020 NW 150 TERR
MIAMI LAKES, FL 33018

FEI Number: 20-8561595 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:

JORGE LUIS LOPEZ-GARCIA PA
1570 MADRUGA AVE STE 211
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

OLIVERA, ARIEL L MGRM
9020 NW 150 TER
MIAMI LAKES, FL 33018 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: ARIEL L. OLIVERA

05/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LUXE FINANCIAL, LLC,
Address: 6953 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: USA MOUNTAIN, LLC,
Address: 6953 HARDING AVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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

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: ARIEL L. OLIVERA

MGRM

05/09/2008

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