

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 06, 2009  
Secretary of State**

DOCUMENT# L07000053568

Entity Name: COOPER OFFICE B-207, LLC

**Current Principal Place of Business:**

5220 SOUTH UNIVERSITY DRIVE  
STE. C-104  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5220 SOUTH UNIVERSITY DRIVE  
STE. C-104  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 26-0205111      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILVA'S ENTERPRISE, INC.  
5220 S UNIVERSITY DR  
SUITE C-102  
DAVIE, FL 33328 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: MGR ( ) Delete  
Name: MARTIN, DANIEL  
Address: 5220 SOUTH UNIVERSITY DRIVE, STE. C-104  
City-St-Zip: DAVIE, FL 33328

**ADDITIONS/CHANGES:**

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: DANIEL MARTIN

MGR

03/06/2009

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