

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060146

FILED  
Apr 26, 2008  
Secretary of State

**Entity Name:** SCALATORE OF CORAL GABLES, LLC

**Current Principal Place of Business:**

10220 S.W. 20TH STREET  
DAVIE, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

10220 S.W. 20TH STREET  
DAVIE, FL 33324

**New Mailing Address:**

**FEI Number:** 26-0337845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: BERGER, ALEXANDRE  
Address: 10220 S.W. 20TH STREET  
City-St-Zip: DAVIE, FL 33324

Title: MGRM ( ) Delete  
Name: BERGER, ANA P  
Address: 10220 S.W. 20TH STREET  
City-St-Zip: DAVIE, FL 33324

**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: ALEXANDRE BERGER

MAN

04/26/2008

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