

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000065047

Entity Name: 5050 PROJECT, LLC

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

1940 HARRISON ST
203
HOLLYWOOD, FL 33020

Current Mailing Address:

1940 HARRISON ST
203
HOLLYWOOD, FL 33020

New Principal Place of Business:

1475 BRICKELL AVE.
2403
MIAMI, FL 33129

New Mailing Address:

1475 BRICKELL AVE.
2403
MIAMI, FL 33129

FEI Number: 26-0398922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAVES & ARMSTRONG, PA
1940 HARRISON ST
203
HOLLYWOOD, FL 33020 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: KELLERMEN, LUIS
Address: 1940 HARRISON ST, STE 203
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM () Delete
Name: VARELA U., DIEGO L
Address: 1940 HARRISON ST, STE 203
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KELLEMEIN, LUIS
Address: 1475 BRICKELL AVE APT. 2403
City-St-Zip: MIAMI, FL 33129

Title: MGRM (X) Change () Addition
Name: VARELA U., DIEGO L
Address: 1475 BRICKELL AVE APT. 2403
City-St-Zip: MIAMI, FL 33129

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: LUIS KELLEMEIN

MGR

04/10/2008

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