

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074595

Entity Name: CSM REAL ESTATE, LLC

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

5537 SARDINIA STREET  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

5537 SARDINIA STREET  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

FEI Number: 26-0726280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BSPA CORPORATE SERVICES, INC.  
350 E. LAS OLAS BLVD.  
SUITE 1000  
FT. LAUDERDALE, FL 33301 US

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

THOMAS O. WELLS, P.A.  
540 BILTMORE WAY  
CORAL GABLES, FL 33134 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: THOMAS O. WELLS

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MELGOZA, CESAR M  
Address: 5537 SARDINIA STREET  
City-St-Zip: CORAL GABLES, FL 33146 US

Title: MGR ( ) Delete  
Name: MELGOZA, SMILKA  
Address: 5537 SARDINIA STREET  
City-St-Zip: CORAL GABLES, FL 33146

**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: CESAR M. MELGOZA

MGR

04/29/2009

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