2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107367

Entity Name: CAVAS AT SUNSET LLC

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4569 WESTON RD 5829 SW 73 STREET WESTON, FL 33331 SOUTH MIAMI, FL 33143 **Current Mailing Address: New Mailing Address:** 4569 WESTON RD 661 BRICKELL KEY DRIVE WESTON, FL 33331 MIAMI, FL 33131 FEI Number: 26-1315043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HERNANDEZ, RAFAEL 4569 WESTON RD US WESTON, FL 33331 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: ADDITIONS/CHANGES: Title: MGRM () Delete (X) Change () Addition MASTER C LLC, MASTER C LLC, Name: Name: 4569 WESTON RD Address: 4569 WESTON RD Address: WESTON, FL 33331 City-St-Zip: WESTON, FL 33331 City-St-Zip: Title: MGRM () Delete Title: MGR (X) Change () Addition ABASCAL, CARLOS E Name: ABASCAL, CARLOS E Name: Address: 391 ISLA DORADA BLVD Address: 391 ISLA DORADA BLVD City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: CORAL GABLES, FL 33143 Title: MGRM () Delete Title: MGR (X) Change () Addition TORO ABASCAL, MARISELA TORO ABASCAL, MARISELA Name: Name: Address: 391 ISLA DORADA BLVD Address: 391 ISLA DORADA BLVD City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: CORAL GABLES, FL 33143 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: ALICANTE WINES LLC, Address: Address: 391 ISLA DORADA BLVD City-St-Zip: City-St-Zip: CORAL GABLES, FL 33143 Title: () Delete Title: () Change (X) Addition HERNANDEZ, RAFAEL Name: Name: 4569 WESTON RD Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33331 Title: () Delete Title: () Change (X) Addition HERNANDEZ, CAROLYN Name: Name: Address: Address: 4569 WESTON RD WESTON, FL 33331 City-St-Zip: 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: RAFAEL HERNANDEZ MGR 04/23/2008