

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000001932

Entity Name: COLONY 1001 LLC

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

C/O BARED AND ASSOC., P.A.
1500 SAN REMO AVE., SUITE 248
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

C/O BARED AND ASSOC., P.A.
1500 SAN REMO AVE., SUITE 248
CORAL GABLES, FL 33146

New Mailing Address:

1428 BRICKELL AVENUE
SUITE 206
MIAMI, FL 33131

FEI Number: 26-1695351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARED, PABLO R ESQ.
C/O BARED AND ASSOC., P.A.
1500 SAN REMO AVE., SUITE 248
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

FIGUEROA, JUAN A
1428 BRICKELL AVENUE
SUITE 206
MIAMI, FL 33131 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: JUAN A. FIGUEROA

03/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HUSNI, ELIAS
Address: 1500 SAN REMO AVE., SUITE 248
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: MASRI, SIMON
Address: 1500 SAN REMO AVE., SUITE 248
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: SIMON MASRI

MGR

03/06/2009

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