

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002721

FILED
Feb 03, 2009
Secretary of State

Entity Name: CROSSROADS REAL ESTATE GROUP, LLC

Current Principal Place of Business:

1200 BRICKELL AVE.
1950
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1200 BRICKELL AVE.
1950
MIAMI, FL 33131

New Mailing Address:

785 CRANDON BLVD.
201
KEY BISCAYNE, FL 33149

FEI Number: 26-1700161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMBINO, GUSTAVO
785 CRANDON BLVD.
201
KEY BISCAYNE, FL 33149 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: BRUGO, JORGE
Address: 1200 BRICKELL AVE. #1950
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: SABATE, JOSE
Address: 1200 BRICKELL AVE. #1950
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: GAMBINO, GUSTAVO
Address: 1200 BRICKELL AVE. #1950
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: GAMBINO, GUSTAVO
Address: 785 CRANDON BLVD #201
City-St-Zip: KEY BISCAYNE, FL 33149

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: GUSTAVO GAMBINO

MGRM

02/03/2009

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