

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059544

Entity Name: SKBM RE INVESTMENT, LLC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

12000 BISCAYNE BLVD.
SUITE 500
NORTH MIAMI, FL 33181 US

Current Mailing Address:

12000 BISCAYNE BLVD.
SUITE 500
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

1175 NE 125 STREET
SUITE 512
NORTH MIAMI, FL 33161 US

New Mailing Address:

1175 NE 125TH STREET
SUITE 512
NORTH MIAMI, FL 33161 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDEN, RICHARD A ESQ.
12000 BISCAYNE BLVD.
SUITE 500
NORTH MIAMI, FL 33181 US

Name and Address of New Registered Agent:

GOLDEN, RICHARD A ESQ.
1175 NE 125 STREET
SUITE 512
NORTH MIAMI, FL 33161 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: RICHARD A. GOLDEN

03/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: GOLDEN, SUSAN K
Address: 1175 NE 125 STREET, SUITE 512
City-St-Zip: NORTH MIAMI, FL 33161

Title: MGR () Change (X) Addition
Name: KRAMER, BARBARA M
Address: 1175 NE 125 STREET, SUITE 512
City-St-Zip: NORTH MIAMI, FL 33161

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: SUSAN K. GOLDEN

MGR

03/24/2009

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