


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2008 8:00 am
Secretary of State

02-01-2008 90045 030 ***138.75

DOCUMENT # L95000000311

1. Entity Name
 1515 WASHINGTON AVENUE PROPERTIES. L.C.



Principal Place of Business 3191 CORAL WAY SUITE 1008 MIAMI, FL 33145 US	Mailing Address 3191 CORAL WAY SUITE 1008 MIAMI, FL 33145 US
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60005445



01302008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-0577402	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SOSTCHIN, ~~GUILLERMO~~ **HENRIETHA**
 3191 CORAL WAY
 SUITE 1008
 MIAMI, FL 33145
*640 NE 176 ST
 NMB FL 33162*

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Guillermo Sostchin* 1/30/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOSTCHIN, GUILLERMO HENRIETHA 3191 CORAL WAY SUITE 1008 MIAMI, FL 33145 <i>640 NE 176 ST NMB FL 33162</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VIVES, GRACE 3191 CORAL WAY SUITE 1008 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STONE, DAVID E 10 EDGEWATER DRIVE SUITE 9D CORAL GABLES, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERCAL, ENRIQUE S 165 PEGENT PLACE LAKEWOOD, NJ 08701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOSTCHIN, DANA 17801 NORTHEAST 9 COURT NORTH MIAMI BEAC, FL 33132
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERCAL, IDA 5825 COLLUMS AVENUE SUITE 5G MIAMI BEACH, FL 33140

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Guillermo Sostchin* mcr 1/30/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #