

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000314

Entity Name: OLIVAS OWNERS, LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 689
TELLURIDE, CO 81435

New Principal Place of Business:

965 KELLER RD
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

P.O. BOX 689
TELLURIDE, CO 81435

New Mailing Address:

FEI Number: 95-4688127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWE, OSMOND
501 BRICKELL KEY DR., #504
MIAMI, FL 33131 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: UCR LLC,
Address: P.O. BOX 689
City-St-Zip: TELLURIDE, CO 81435

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

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: IRELAND, JUD
Address: P. O. BOX 689
City-St-Zip: TELLURIDE, CO 81435

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: JUD IRELAND

MGR

04/30/2007

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