## 2008 LIMITED LIABILITY COMPANY

## **FILED** ANNUAL REPORT Feb 25, 2008 08:00 AN Secretary of State **DOCUMENT # M07000006484** CORECO PARTNERS I LLC Principal Place of Business Mailing Address 2250 S.W. 3RD AVE., #301 MIAMI, FL 33129 2250 S.W. 3RD AVE., #301 MIAMI, FL 33129 01112008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 26-1286068 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE mits 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 register J.A. VONDER GOLTZ FILE NOW!!! FEE IS \$138.75 Unnonnä839a99. After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9, TITLE MGR VON DER GOLTZ, J. A. NAME 2250 S.W. 3RD AVE., #301 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33129 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

11. I hereby certily that the information subglied 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 further than the information subglitted in the information subglitted in 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 of the information subglitted in this report is true and accurate and the information subglitted in the information subglitted in this report is true and accurate and the information subglitted in the i

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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP