

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 16, 2007
Secretary of State**

DOCUMENT# L06000109449

Entity Name: SASPER, LLC

Current Principal Place of Business:

New Principal Place of Business:

C/O 1500 SAN REMO AVE.
SUITE 248
CORAL GABLES, FL 33146

Current Mailing Address:

New Mailing Address:

C/O 1500 SAN REMO AVE.
SUITE 248
CORAL GABLES, FL 33146

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

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BARED, PABLO R ESQ
C/O 1500 SAN REMO AVE.
SUITE 248
CORAL GABLES, FL 33146 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: SOFER, ELIAS
Address: C/O 1500 SAN REMO AVE.
City-St-Zip: CORAL GABLES, FL 33146

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

Title: MGR () Delete
Name: SOFER, ABRAHAM
Address: C/O 1500 SAN REMO AVE.
City-St-Zip: CORAL GABLES, FL 33146

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SOFER

M

01/16/2007

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