

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068494

FILED
Feb 03, 2009
Secretary of State

Entity Name: MIAMI REAL ESTATE GROUP, LLC

Current Principal Place of Business:

1000 SOUTH POINTE DRIVE, APT. 2204
MIAMI BEACH, FL 33139

New Principal Place of Business:

1000 SOUTH POINTE DRIVE
APT. 2204
MIAMI BEACH, FL 33139

Current Mailing Address:

1000 SOUTH POINTE DRIVE, APT. 2204
MIAMI BEACH, FL 33139

New Mailing Address:

1000 SOUTH POINTE DRIVE
APT. 2204
MIAMI BEACH, FL 33139

FEI Number: 26-3057286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ASION, ANDRES
1000 S POINTE DRIVE
2204
MIAMI BEACH, FL 33139 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: ANDRES ASION

02/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ASION, ANDRES
Address: 1000 SOUTH POINTE DRIVE, APT. 2204
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: ASION, ANDRES
Address: 1000 SOUTH POINTE DRIVE, APT. 2204
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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

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

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: ANDRES ASION

MGR

02/03/2009

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