

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 17, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L04000007433

1. Entity Name  
 PRIDE HOMES OF CRYSTAL LAKE, L.L.C.



Principal Place of Business  
 12448 S.W. 127TH AVE  
 MIAMI, FL 33186

Mailing Address  
 12448 S.W. 127TH AVE  
 MIAMI, FL 33186



01092008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0742090	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

KUPFER, PAUL H  
 5541 UNIVERSITY DR  
 #103  
 CORAL SPRINGS, FL 33067

**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 \_\_\_\_\_ (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 GARCIA, CARLOS M 12448 S.W. 127TH AVE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FERNANDEZ, MARTHA 12448 S.W. 127TH AVE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FONTE, OMAR 12448 SW 127 AVE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000787279  
 01/17/08-80075-014-138.75

**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: \_\_\_\_\_ Date: 1/10/08 Daytime Phone #: 305 969 2000