


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000066545 1. Entity Name MASTER PLAN DEVELOPERS LLC	
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Principal Place of Business 8500 SW 8TH STREET, SUITE 228 MIAMI, FL 33144	Mailing Address 8500 SW 8TH STREET, SUITE 228 MIAMI, FL 33144
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DO NOT WRITE IN THIS SPACE



04042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1601459	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

MACHADO, JOSE L ESQ.
 8500 SW 8TH STREET, SUITE 228
 MIAMI, FL 33144

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VICTORIA REAL ESTATE MANAGEMENT INC. 8500 SW 8TH STREET, SUITE 228 MIAMI, FL 33144
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05/11/07-80055-013 50.00

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: 4/27/07 DAYTIME PHONE #: 305 262 6930
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE