

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012326

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: RHAPSODY DEVELOPER LLC

**Current Principal Place of Business:**

1110 BRICKELL AVE., SUITE 310  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

1110 BRICKELL AVE., SUITE 310  
MIAMI, FL 33131

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

NS CORPORATE SERVICES INC.  
801 BRICKELL AVE. SUITE 1580  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

NS CORPORATE SERVICES INC.  
1110 BRICKELL AVE., SUITE 310  
MIAMI, FL 33131 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: NS CORPORATE SERVICES INC.

04/25/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LATITUDE CONSTRUCTIO, N LLC  
Address: 801 BRICKELL AVE. SUITE 1580  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LATITUDE CONSTRUCTIO, N LLC  
Address: 1110 BRICKELL AVE., SUITE 310  
City-St-Zip: MIAMI, FL 33131

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: LATITUDE CONSTRUCTION LLC

MGR

04/25/2007

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