# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 15, 2009**
**Secretary of State**

DOCUMENT# L08000030093

**Entity Name:** CSIP DEVELOPMENT LLC

**Current Principal Place of Business:**

C/O 701 BRICKELL AVENUE SUITE 1400
MIAMI, FL 33131

**New Principal Place of Business:**

560 LINCOLN ROAD
SUITE 303
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O 701 BRICKELL AVENUE SUITE 1400
MIAMI, FL 33131

**New Mailing Address:**

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

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

LAW CENTER OF THE AMERICAS, LLC
701 BRICKELL AVENUE, SUITE 1400
MIAMI, FL 33131 US

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

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:**

Title: MGR ( ) Delete
Name: OSORIO, CLAUDIO
Address: 701 BRICKELL AVENUE SUITE 1400
City-St-Zip: MIAMI, FL 33131

Title: MGR ( ) Delete
Name: OSORIO, AMARILIS
Address: 701 BRICKELL AVENUE SUITE 1400
City-St-Zip: MIAMI, FL 33131

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRP (X) Change ( ) Addition
Name: OSORIO, CLAUDIO
Address: 560 LINCOLN ROAD, SUITE 303
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRV (X) Change ( ) Addition
Name: OSORIO, AMARILIS
Address: 560 LINCOLN ROAD, SUITE 303
City-St-Zip: MIAMI BEACH, FL 33139

Title: CFO ( ) Change (X) Addition
Name: TOLL, CRAIG
Address: 560 LINCOLN ROAD, SUITE 303
City-St-Zip: MIAMI BEACH, FL 33139

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: CLAUDIO OSORIO P 04/15/2009

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