

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008445

Entity Name: DEL PRADO, LLC

FILED  
Jan 02, 2007  
Secretary of State

**Current Principal Place of Business:**

1432 SW COURTYARD LANE  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

POBOX 100510  
CAPE CORAL, FL 33910

**Current Mailing Address:**

P.O.BOX 100510  
CAPE CORAL, FL 33910

**New Mailing Address:**

FEI Number: 65-1025234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAHN, JUERGEN  
1432 SW COURTYARDS LN  
#101  
CAPE CORAL, FL 33914 US

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

HAHN, JUERGEN  
221 NW 14TH AV  
CAPE CORAL, FL 33993 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: JUERGEN HAHN

01/02/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HAHN, JUERGEN  
Address: POBOX 100510  
City-St-Zip: CAPE CORAL, FL 33910

Title: MGR ( ) Delete  
Name: FISCHER, ALEXANDRA  
Address: POBOX 100510  
City-St-Zip: CAPE CORAL, FL 33910

**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 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: JUERGEN HAHN

MGR

01/02/2007

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